

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 18, 2008  
Secretary of State**

DOCUMENT# N02000003863

Entity Name: FOUNDATION TO EMPOWER MARRIAGE, INC.

**Current Principal Place of Business:**

1231 PUNTA GORDA CIRCLE  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

1231 PUNTA GORDA CIRCLE  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

FEI Number: 11-3649868      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAGYAR, DON W  
1231 PUNTA GORDA CIRCLE  
WINTER SPRINGS, FL 32708      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P/D      ( ) Delete  
Name: MAGYAR, DON W  
Address: 1231 PUNTA GORDA CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D/T      ( ) Delete  
Name: CUSANO, ROSE A  
Address: 1057 WEAVER DRIVE  
City-St-Zip: OVIEDO, FL 32765

Title: D      ( ) Delete  
Name: BOYLAN, EDWIN J JR.  
Address: 12 WALTER ROAD  
City-St-Zip: SEYMOUR, CT 06483

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSE CUSANO

D/T

02/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date