

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008648

FILED  
May 30, 2007  
Secretary of State

Entity Name: THE REAL ROSEWOOD FOUNDATION, INC.

**Current Principal Place of Business:**

17904 SW 183RD AVE  
ARCHER, FL 326185084

**New Principal Place of Business:**

**Current Mailing Address:**

17904 SW 183RD AVE  
ARCHER, FL 326185084

**New Mailing Address:**

FEI Number: 42-1607804      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JENKINS, LIZZIE PRB  
17904 SW 183RD AVE  
ARCHER, FL 326185084 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: D      ( ) Delete  
Name: JENKINS, LIZZIE PRB  
Address: 17904 SW 183RD AVE  
City-St-Zip: ARCHER, FL 326185084

Title: D      ( ) Delete  
Name: JENKINS, JOHN M SR  
Address: P.O. BOX 252  
City-St-Zip: ARCHER, FL 32618

Title: D      ( ) Delete  
Name: CLARK, IRABELL  
Address: P.O. BOX 52  
City-St-Zip: ARCHER, FL 32618

Title: D      ( ) Delete  
Name: WITHERSPOON, AVON  
Address: P.O. BOX 140686  
City-St-Zip: GAINESVILLE, FL 32614

**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:

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: JOHN M. JENKINS, SR.

D

05/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date