2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2008
Secretary of State

DOCUMENT# N03000008648

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: LIZZIE R. JENKINS PRES 07/09/2008
Electronic Signature of Signing Officer or Director Date