

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 29, 2009  
Secretary of State

DOCUMENT# N04000003123

Entity Name: HART FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

4270 SW TISTLE TERR  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

**Current Mailing Address:**

4270 SW TISTLE TERR  
PALM CITY, FL 34990 US

**New Mailing Address:**

FEI Number: 03-0470682      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JONES, KENNETH M  
1333 S UNIVERSITY DR STE 201  
FORT LAUDERDALE, FL 33324 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: BROWN, PAMELA H  
Address: 100 FERNWOOD CIR  
City-St-Zip: DAYTONA BEACH, FL 321141132

Title: VPD ( ) Delete  
Name: HART, GERALD A  
Address: 4270 THISTLE TERR  
City-St-Zip: PALM CITY, FL 34990

Title: PDS ( ) Delete  
Name: MATHER, RICHARD  
Address: 4034 SW LENEAGLES CIR  
City-St-Zip: PALM CITY, FL

Title: D ( ) Delete  
Name: DOMENICO, JOHN  
Address: 8144 SWANS WAY  
City-St-Zip: WEST PALM BCH GARDENS, FL

Title: D ( ) Delete  
Name: KLEIN, LINK  
Address: 400 N FLAGLER DR PH-C4  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete  
Name: JONES, KENNETH M  
Address: 1333 S UNIVERSITY DR STE 201  
City-St-Zip: FORT LAUDERDALE, FL 33324

**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:

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: PAMELA H. BROWN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DIR

03/29/2009

\_\_\_\_\_  
Date