

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04172

FILED  
May 02, 2007  
Secretary of State

Entity Name: SICKLE CELL FOUNDATION, INCORPORATED

**Current Principal Place of Business:**

1336 VICKERS RD  
TALLAHASSEE, FL 32303 US

**New Principal Place of Business:**

**Current Mailing Address:**

110 W. 5TH AVE.  
TALLAHASSEE, FL 32303 US

**New Mailing Address:**

1336 VICKERS RD  
TALLAHASSEE, FL 32303 US

FEI Number: 59-2518049      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:**

PENERMON, VELMA S  
1336 VICKERS RD  
TALLAHASSEE, FL 32303 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: ED ( ) Delete  
Name: PENERMON, VELMA S  
Address: 906 KENDALL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: C ( ) Delete  
Name: PARKS, DARYL ESQ  
Address: 240 NORTH MAGNOLIA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VC ( ) Delete  
Name: HOLIDAY, ERVIN  
Address: 800 W BREVARD STREET  
City-St-Zip: TALLAHASSEE, FL 32304

Title: T ( ) Delete  
Name: LANIER, HOMER  
Address: 2000 BUSHY HALL ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: MARTIN, DEXTER  
Address: 6738 DONERAIL TRAIL  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: MCCLEOD, CLINTON  
Address: 1353 LAFAYETTE ST, STE B  
City-St-Zip: TALLAHASSEE, FL 32301

**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: S (X) Change ( ) Addition  
Name: STIELL, PHELICIA D  
Address: 1331 E. LAYFAYETTE ST SUITE E  
City-St-Zip: TALLAHASSEE, FL 32301

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: VELMA PENERMON STEVENS

ED

05/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date