

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04172

FILED  
Apr 29, 2010  
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:**

1336 VICKERS RD  
TALLAHASSEE, FL 32303 US

**New Mailing Address:**

FEI Number: 59-2518049

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**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  
Name: PENERMON, VELMA S  
Address: 906 KENDALL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

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

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

Title: T  
Name: SCOTT, TAITA  
Address: 3225 HESTER DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

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

Title: S  
Name: DUNCAN, PAMELA D  
Address: 8108 PRESERVATION COURT  
City-St-Zip: TALLAHASSEE, FL 32312

I hereby 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 all other like empowered.

SIGNATURE: VELMA PENERMON STEVENS

ED

04/29/2010

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

\_\_\_\_\_  
Date