

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011036

FILED
Apr 15, 2009
Secretary of State

Entity Name: DETTER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

11519 AERIE LANE
NAPLES, FL 34120 US

New Principal Place of Business:

Current Mailing Address:

11519 AERIE LANE
NAPLES, FL 34120 US

New Mailing Address:

FEI Number: 20-3696924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODMAN BREEN & GIBBS
3838 TAMiami TRAIL NORTH
300
NAPLES, FL 34103 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: P () Delete
Name: DETTER, IRIS F
Address: 11519 AERIE LANE
City-St-Zip: NAPLES, FL 34120 US

Title: VP () Delete
Name: KOERNER, JODI
Address: 4935 MERIDIAN COURT
City-St-Zip: SALINE, MI 48176 US

Title: SEC () Delete
Name: WIEDMEYER, JILL
Address: 8631 SLEEPY HOLLOW DRIVE
City-St-Zip: SALINE, MI 48176 US

Title: TRES () Delete
Name: DETTER, JASON
Address: 12110 WEST DEVIS
City-St-Zip: WEST OLIVE, MI 49460 MI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: WIEDMEYER, JILL
Address: 8631 SLEEPY HOLLOW DRIVE
City-St-Zip: SALINE, MI 48176 US

Title: SEC (X) Change () Addition
Name: DETTER, JASON
Address: 12110 WEST DEVIS
City-St-Zip: WEST OLIVE, MI 49460 MI

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: IRIS F DETTER

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date