2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2007 8:00 am
Secretary of State
02-13-2007 90006 030 ****70.00

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1. Entity Name
THE PBSJ FOUNDATION, INC.

Principal Place of Business	Mailing Address
5300 W CYPRESS STREET SUITE 200 TAMPA, FL 33607	5300 W CYPRESS STREET SUITE 200 TAMPA, FL 33607

66004207

01092007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-4235058 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHAFFER, BECKY S 5300 W CYPRESS STREET SUITE 200 TAMPA, FL 33607	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KENNER, TODD J 2270 CORPORATE CIRCLE SUITE 100 HENDERSON, NV 890747755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5300 W. Cypress St., Suite 200 Tampa, FL 33607	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANTHONY, CLARENCE 3230 COMMERCE PLACE SUITE A WEST PALM BEACH, FL 33407	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Becky S. Schaffer 5300 W. Cypress St., Ste. 200 Tampa, FL 33607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZUMWALT, JOHN B III 5300 W CYPRESS STREET SUITE 200 TAMPA, FL 33607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/C	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUCKLEY, JOHN D 3638 SW 57TH AVE MIAMI, FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Donald J. Vrana 5300 W. Cypress St., Suite 200 Tampa, FL 33607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREEN, CECILIA 6504 BRIDGE POINT PARKWAY SUITE 200 AUSTIN, TX 78730	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald J. Vrana Donald J. Vrana, Treasurer 1/26/07 813-282-7275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #