

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006197

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** KREWE OF SOUTH SHORE MARAUDERS FOUNDATION, INC.

**Current Principal Place of Business:**

9304 RIVER COVE DR  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

9304 RIVER COVE DR  
RIVERVIEW, FL 33569

**New Mailing Address:**

**FEI Number:** 20-5074594

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEIS, DOROTHY G  
3529 BERGER ROAD  
LUTZ, FL 33548 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: PD ( ) Delete  
Name: LOVE, RICHARD  
Address: 1023 SAGO PALM WAY  
City-St-Zip: APOLLO BEACH, FL 33572

Title: VD ( ) Delete  
Name: CYR, ELLEN  
Address: 1144 EMERALD DUNES  
City-St-Zip: SUN CITY, FL 33573

Title: VD ( ) Delete  
Name: HANN, GINA  
Address: 6628 WATERTON ROAD  
City-St-Zip: RIVERVIEW, FL 33569

Title: SD ( ) Delete  
Name: GIORDANO, CHRIS  
Address: 134 KIANA DRIVE  
City-St-Zip: BRANDON, FL 33511

Title: TD ( ) Delete  
Name: WEIS, DOROTHY G  
Address: 3529 BERGER ROAD  
City-St-Zip: LUTZ, FL 33548

**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:

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: DOROTHY G WEIS

SEC

03/23/2009

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

\_\_\_\_\_  
Date