

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007293

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: IN GOD WE TRUST FOUNDATION INCORPORATED

**Current Principal Place of Business:**

8815 CONROY-WINDERMERE ROAD  
SUITE 232  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

8815 CONROY-WINDERMERE ROAD  
SUITE 232  
ORLANDO, FL 32835

**New Mailing Address:**

FEI Number: 26-1209622      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NUNNELLEY, DARRELL G  
1733 HEMPEL AVENUE  
WINDERMERE, FL 34786      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: NUNNELLEY, MICHELE A  
Address: 1733 HEMPEL AVENUE  
City-St-Zip: WINDERMERE, FL 34786

Title: VP      ( ) Delete  
Name: FREEMAN, ROBERT A  
Address: 2629 STANTON HALL CT  
City-St-Zip: WINDERMERE, FL 34786

Title: S,T      ( ) Delete  
Name: PREWITT, EDITH L  
Address: 1733 HEMPEL AVENUE  
City-St-Zip: WINDERMERE, FL 34786

**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:

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: MICHELE A. NUNNELLEY

P

02/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date