

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009817

**FILED**  
**Jun 06, 2012**  
**Secretary of State**

**Entity Name:** STANFORD FOUNDATION INC.

**Current Principal Place of Business:**

251 NW 117TH WAY  
CORAL SPRINGS, FL 33071 US

**New Principal Place of Business:**

12979 SW 28TH COURT  
MIRAMAR, FL 33027 US

**Current Mailing Address:**

7913 CATALINA CIRCLE  
TAMARAC, FL 33321 US

**New Mailing Address:**

12979 SW 28TH COURT  
MIRAMAR, FL 33027 US

**FEI Number:** 51-0638671

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MARRIOTT-BLAKE, CRYSTAL-ANN  
7913 CATALINA CIRCLE  
TAMARAC, FL 33321 US

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

ROBERTS, CRYSTAL-ANN  
12979 SW 28TH COURT  
MIRAMAR, FL 33027 US

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: CR

06/06/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROBERTS, CRYSTAL-ANN  
Address: 12979 SW 28TH COURT  
City-St-Zip: MIRAMAR, FL 33027 US

Title: VP  
Name: LONGBRIDGE, CAROL  
Address: 7913 CATALINA CIRCLE  
City-St-Zip: TAMARAC, FL 33321

Title: D  
Name: BARTLEY, NASHEIKA  
Address: 500 N 71ST AVENUE  
City-St-Zip: HOLLYWOOD, FL 33024

Title: D  
Name: ROYAL, KAREN  
Address: PO BOX 812422  
City-St-Zip: BOCA RATON, FL 33481

Title: D  
Name: ANDERSON-WORTS, PAULA MD  
Address: 11160 MINNEAPOLIS DRIVE  
City-St-Zip: COOPER CITY, FL 33026

Title: D  
Name: LESLIE, SHERYL  
Address: 7790 NW 23RD STREET  
City-St-Zip: PEMBROKE PINES, FL 33024

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: CR

PRES

06/06/2012

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

\_\_\_\_\_  
Date