

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2009
Secretary of State

DOCUMENT# N07000012295

Entity Name: GIFT TO CHARITY, INC.

Current Principal Place of Business:

451 CENTRAL PARK DRIVE
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

451 CENTRAL PARK DRIVE
LARGO, FL 33771

New Mailing Address:

FEI Number: 26-0621033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVELACE, WILLIAM K ESQ.
401 S. LINCOLN AVENUE
CLEARWATER, FL 33756 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: D () Delete
Name: DAVENPORT, DOUGLAS J
Address: 451 CENTRAL PARK DRIVE
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: COOK, THOMAS J
Address: 451 CENTRAL PARK DRIVE
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: LOVELACE, WILLIAM K ESQ.
Address: 451 CENTRAL PARK DRIVE
City-St-Zip: LARGO, FL 33771

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: DOUGLAS DAVENPORT

D

03/21/2009

Electronic Signature of Signing Officer or Director

Date