

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 20, 2011  
Secretary of State**

DOCUMENT# N10000001892

Entity Name: MACRAE FAMILY FOUNDATION, INC

**Current Principal Place of Business:**

503 CASEY KEY  
NOKOMIS, FL 34275 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1786  
NOKOMIS, FL 34274 US

**New Mailing Address:**

FEI Number: 27-3116235      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BETTERTON, GREG A PA  
735 E VENICE AVENUE  
SUITE 200  
VENICE, FL 34285 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: DIR  
Name: MACRAE, DAVID N  
Address: PO BOX 1786  
City-St-Zip: NOKOMIS, FL 34274 US

Title: DIR  
Name: MACRAE, SUSAN K  
Address: PO BOX 1786  
City-St-Zip: NOKOMIS, FL 34274

Title: DIR  
Name: MACRAE, ALLISON L  
Address: PO BOX 1786  
City-St-Zip: NOKOMIS, FL 34274 US

Title: DIR  
Name: MACRAE, SARAH J  
Address: PO BOX 1786  
City-St-Zip: NOKOMIS, FL 34274

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: DAVID N. MACRAE

DIR

01/20/2011

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

\_\_\_\_\_  
Date