


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2007 08:00 AM
Secretary of State

DOCUMENT # N28207 1. Entity Name THE BERT FISH FOUNDATION, INC.	
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Principal Place of Business BERT FISH FOUNDATION 3 DELAND FL 32724 US	Mailing Address BERT FISH FOUNDATION P. O. BOX 46 N/A DELAND FL 32721 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc	3. Mailing Address Suite, Apt. #, etc
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1st MOORE CR2E037 (10/06)

City & State Zip Country	City & State Zip Country
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4. FEI Number 59-3020772	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCKINNON, NOAH C. JR. 595 WEST GRANADA BLVD., SUITE A ORMOND BEACH FL 32074
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Noah C. Mckinnon Jr* DATE: 1/23/07

Signature, typed or printed name of registered agent and fee if applicable (Not for Registered Agent signature required when re-registering)

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE	DC SCHILDECKER, WILLIAM W. 7 PLEASANT VIEW CIRCLE DAYTONA BEACH FL	<input type="checkbox"/>
TITLE	DT WARD, CARL 2910 DIXIE HWY CRESTVIEW HILLS KY 41017	<input type="checkbox"/>
TITLE	VDT MASTER, JOSEPH 145 EAST RICH AVE STE A DELAND FL 32724	<input type="checkbox"/>
TITLE	S REID, ALICE C 1209 WEEPING WILLOW DRIVE DELAND FL 32724	<input type="checkbox"/>
TITLE	TS KEEBLER, WILLIAM 110 FALLEN TIMBER TRAIL DELAND FL 32724	<input type="checkbox"/>
TITLE		<input type="checkbox"/>

11. ADDITIONS; CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
TITLE		<input type="checkbox"/>

U00000604744
01/30/07-80008-017 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Alice C. Reid* **ALICE C. REID** DATE: 1/24/07 386-734-2124