## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32992

FILED May 01, 2005 Secretary of State

Entity Name: SNELL ISLE FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** POST OFFICE BOX 7053 ST. PETERSBURG, FL 337347053 **Current Mailing Address: New Mailing Address:** 535 CENTRAL AVE 150 2 ST S SUITE 411 SUITE 900 SAINT PETERSBURG, FL 33701 LIS SAINT PETERSBURG, FL 33701 US FEI Number: 59-2963930 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAILEY, DIANE BAILEY, DIANE 200 CENTRAL AVENUE SUITE 2200 150 2 ST S SAINT PETERSBURG, FL 33701 SAINT PETERSBURG, FL 33701 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: 05/01/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete EVERTZ, MARY G Name: Name: 101 APPIAN WAY NE Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: Title: VD () Delete Title: () Change () Addition MOOREFIELD, HARRY M Name: Name: Address: 1029 31ST TERRACE NE Address: City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: Title: () Delete Title: () Change () Addition GREEN, JEANNINE Name: Name: 949 31ST TERR NE Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: Title: DS () Delete Title: DS (X) Change ( ) Addition Name: BAILEY, DIANE Name: BAILEY, DIANE 535 CENTRAL AVE, SUITE 411 Address: Address: 150 2 ST S City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANE BAILEY DS 05/01/2005