

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# N44559

Entity Name: GREENFIELD FOUNDATION, INC.

Current Principal Place of Business:

1800 SECOND STREET
SUITE 750
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

1800 SECOND STREET
SUITE 750
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 65-0301946 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, DEBRA
1800 SECOND STREET
SUITE 750
SARASOTA, FL 34236 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: CD () Delete
Name: GREENFIELD, ROBERT
Address: 1650 LANDINGS BLVD
City-St-Zip: SARASOTA, FL 34231

Title: VP () Delete
Name: GREENFIELD, LAUREN
Address: 318 GRANT STREET
City-St-Zip: LONGMONT, CO 80501

Title: VP () Delete
Name: KAHN, CHARLES JR
Address: 123 S. BROAD STREET, # 1832
City-St-Zip: PHILADELPHIA, PA 19109

Title: PD () Delete
Name: GREENFIELD, BILL DR
Address: 1451 BROAD STREET
City-St-Zip: DRESHER, PA 19025 US

Title: D () Delete
Name: FELDMAN, RONALD
Address: 1664 PEMBROOK ROAD
City-St-Zip: MAPLE GLEN, PA 19002

Title: TD () Delete
Name: FELDMAN, JILL
Address: 1664 PEMBROOK ROAD
City-St-Zip: MAPLE GLEN, PA 19002

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:

Title: () Change () Addition
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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: RONALD FELDMAN

DR

04/14/2008

Electronic Signature of Signing Officer or Director

Date