


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Mar 12, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # N47292**  
 1. Entry Name  
**THE SCHUMANN FOUNDATION, INC.**



Principal Place of Business: **8225 5TH STREET SW VERO BEACH FL 32968 US**  
 Mailing Address: **3003 CARDINAL DR #C VERO BEACH FL 32963 US**



1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

4. FEI Number: **65-0298172**  
 Applied For:  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**SCHUMANN, JOHN J. JR**  
**8225 5TH STREET SW**  
**VERO BEACH FL 32968**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title applicable. (NOTE: Registered Agent signature required when re-appointing) DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	SCHUMANN, JOHN J.	
STREET ADDRESS	8225 5TH STREET SW	
CITY-ST-ZIP	VERO BEACH FL 32968	
TITLE	DV	<input type="checkbox"/> Delete
NAME	SCHUMANN, MARK K	
STREET ADDRESS	8225 5TH STREET SW	
CITY-ST-ZIP	VERO BEACH FL 32968	
TITLE	DV	<input type="checkbox"/> Delete
NAME	SCHUMANN, KATHERINE G.	
STREET ADDRESS	8225 5TH STREET SW	
CITY-ST-ZIP	VERO BEACH FL 32968	
TITLE	DT	<input type="checkbox"/> Delete
NAME	OFFUTT, HARRY C.	
STREET ADDRESS	3003 CARDINAL DR SUITE C	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	DS	<input type="checkbox"/> Delete
NAME	COOKSEY, BYRON T.	
STREET ADDRESS	979 BEACHLAND BLVD	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	U00000855084	
CITY-ST-ZIP	03/27/08-80032-022 61.25	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *[Handwritten Signature]* **2/5/08 772-231-2100**