

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000027

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: FOOD FOR THE POOR FOUNDATION, INC.

**Current Principal Place of Business:**

6401 LYONS RD  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

6401 LYONS RD  
COCONUT CREEK, FL 33073

**New Mailing Address:**

FEI Number: 65-0469691      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PRICE, DAVID T  
6401 LYONS RD  
COCONUT CREEK, FL 33073      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: D      ( ) Delete  
Name: PRICE, DAVID T  
Address: 6401 LYONS RD  
City-St-Zip: POMPANO BEACH, FL 33073

Title: D      ( ) Delete  
Name: BONINA, GRACE  
Address: 10105 UMBERLAND PL  
City-St-Zip: BOCA RATON, FL 33428

Title: D      ( ) Delete  
Name: RAMKISSOON, FR. GREGORY  
Address: 1 MAHOE DR. BOX 267  
City-St-Zip: KINGSTON 11, JAMAICA, W. I.,

**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:

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: DAVID T. PRICE

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

DIR

01/06/2009

\_\_\_\_\_ Date