2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002948

FILED Jan 19, 2009 Secretary of State

Entity Name: EASTER SEALS SOUTHWEST FLORIDA FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

350 BRADEN AVENUE SARASOTA, FL 34243

Current Mailing Address: New Mailing Address:

350 BRADEN AVENUE SARASOTA, FL 34243

FEI Number: 65-0611186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

NAJMY, JOSEPH L NAJMY, JOSEPH L

6320 VENTURE DRIVE, SUITE #104 6320 VENTURE DRIVE, SUITE #104 BRADENTON, FL 34202 US LAKEWOOD RANCH, FL 34202 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: 01/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: CEO (X) Change () Addition

 Name:
 SMITHMAN, JOHN M
 Name:
 LLOYD, WILLIAM T

 Address:
 5678 FRUITVILLE ROAD #6
 Address:
 350 BRADEN AVENUE

 City-St-Zip:
 SARASOTA, FL 34232 US
 City-St-Zip:
 SARASOTA, FL 34243

Title: D () Delete Title: CFO (X) Change () Addition Name: SMALL, HARVEY A Name: WALDO, WILLIAM L

Name: SMALL, HARVEY A Name: WALDO, WILLIAM L
Address: 1819 MAIN STREET # 301 Address: 350 BRADEN AVENUE
City-St-Zip: SARASOTA, FL 34236 US City-St-Zip: SARASOTA, FL 34243

Title: D () Delete Title: C (X) Change () Addition

 Name:
 JUDGE, VIRGINIA M
 Name:
 MCKOWN, KATHLEEN

 Address:
 7893 WILTON CRESCENT CIRCLE
 Address:
 3550 TAMIAMI TRAIL SOUTH

 City-St-Zip:
 UNIVERSITY PARK, FL 34201 US
 City-St-Zip:
 SARASOTA, FL 34239

Title: CD (X) Delete Title: () Change () Addition

Title: TD (X) Delete Title: () Change () Addition

 Name:
 MCKOWN, KATHLEEN
 Name:

 Address:
 8065 BENEVA ROAD S
 Address:

 City-St-Zip:
 SARASOTA, FL 34238 US
 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: WILLIAM T. LLOYD CEO 01/19/2009