

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005339

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: DEMETREE FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

C/O ELISA A. DEMETREE  
3740 BEACH BLVD SUITE 300  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ELISA A. DEMETREE  
3740 BEACH BLVD SUITE 300  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 59-3407379      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DEMETREE, ELISA A  
3740 BEACH BLVD SUITE 300  
JACKSONVILLE, FL 32207      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: DEMETREE, JACK C  
Address: 3740 BEACH BLVD SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D      ( ) Delete  
Name: DEMETREE, BETTY A  
Address: 3740 BEACH BLVD SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D      ( ) Delete  
Name: DEMETREE, MARK C  
Address: 3740 BEACH BLVD SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D      ( ) Delete  
Name: DEMETREE, JACK C JR  
Address: 3740 BEACH BLVD SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D      ( ) Delete  
Name: DEMETREE, ELISA A  
Address: 3740 BEACH BLVD SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D      ( ) Delete  
Name: DOHERTY, LESLIE D  
Address: 3740 BEACH BLVD SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32207

**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  
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: JACK C. DEMETREE

D

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date