

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003330

FILED
Jan 06, 2010
Secretary of State

Entity Name: CAPE ELEUTHERA FOUNDATION, INC.

Current Principal Place of Business:

777 S FLAGLER DR
STE 500 E
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

PO BOX 5910
PRINCETON, NJ 085435910

New Mailing Address:

FEI Number: 31-1591503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEALL, KENNETH J JR
777 S FLAGLER DR STE 500 E
WEST PALM BCH, FL 33401 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: S
Name: BEALL, KENNETH S JR
Address: 777 S FLAGLER DR STE 500E
City-St-Zip: WEST PALM BCH, FL 33401

Title: COB
Name: MORRIS, LES
Address: 70TANGLEWOOD DR
City-St-Zip: PAWLEYS ISLAND, SC 29585

Title: T
Name: GREEN, DAVID W
Address: 260 LAKESIDE DRIVE SE
City-St-Zip: EAST GRAND RAPIDS, MI 49506

Title: PD
Name: MAXEY, CHRISTOPHER B
Address: P O BOX 6008
City-St-Zip: LAWRENCEVILLE, NJ 08648

Title: D
Name: HAMILL, LEITA
Address: 947 LAWRENCEVILLE ROAD
City-St-Zip: PRINCETON, NJ 08640

Title: D
Name: BENETTI, DANIEL
Address: 4600 RICKENBACKER CAUSEWAY
City-St-Zip: MIAMI, FL 33149

I hereby 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 all other like empowered.

SIGNATURE: CHRISTOPHER B. MAXEY

PRES

01/06/2010

Electronic Signature of Signing Officer or Director

Date