

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007426

Entity Name: THE IDLEWILD FOUNDATION, INC.**Current Principal Place of Business:**18333 EXCITING IDLEWILD BLVD
LUTZ, FL 33548**Current Mailing Address:**P.O. BOX 1757
LUTZ, FL 33548 US**FEI Number: 26-3267484****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEAROLF, PIETER J
18371 N. DALE MABRY HWY
LUTZ, FL 33548 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	DEAROLF, PIETER J
Address	P.O. BOX 1757
City-State-Zip:	LUTZ FL 33548

Title	D
Name	TAYLOR, ROBERT E
Address	P.O. BOX 1757
City-State-Zip:	LUTZ FL 33548

Title	VC
Name	PERRY, ROBERT M
Address	P. O. BOX 1757
City-State-Zip:	LUTZ FL 33548

Title	SEC
Name	NIELSEN, RICHARD AJUDGE
Address	P.O. BOX 1757
City-State-Zip:	LUTZ FL 33548

Title	TREA
Name	SMITH, BYRON C
Address	P.O. BOX 1757
City-State-Zip:	LUTZ FL 33548

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: PIETER J. DEAROLF**CHAIRMAN****04/02/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date