2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700886

FILED Apr 28, 2008 Secretary of State

Entity Name: IVEY MEMORIAL FOUNDATION INC.

Littly Nai	ille. IVET ME	INIORIAL POUNDATION, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
819 PARK		ITED METHODCHURCH 204				
Current M	lailing Addre	ss:	New Ma	New Mailing Address:		
819 PARK		ITED METHODCHURCH 204				
FEI Number:	: 23-7211219	FEI Number Applied For ()	FEI Number Not A	pplicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name a	nd Address of	New Registered Agent:	
RHANES, VERNON 819 PARK ST JACKSONVILLE, FL 322043393 US				GUERRY, HELEN 819 PARK ST JACKSONVILLE, FL 322043393 US		
	named entity e of Florida.	submits this statement for the p	urpose of changir	ig its registered	office or registered agent, or both,	
SIGNATURE: HELEN GUERRY					04/28/2008	
	Electro	nic Signature of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PICKREN, CH	NGTON COVE TERRACE	Title: Name: Address: City-St-Zi		()Change ()Addition	
Title: Name: Address: City-St-Zip:	GUERRY, HEI 750 OAK STR		Title: Name: Address: City-St-Zi		()Change ()Addition	
Title: Name: Address: City-St-Zip:	HODGES, BIL 1315 WINDSO		Title: Name: Address: City-St-Zi		() Change () Addition	
Title: Name: Address: City-St-Zip:	MATHEWS, M 3034 BEAUCL	() Delete ARK ERC OAKS DRIVE S .E, FL 32257 US	Title: Name: Address: City-St-Zi		() Change () Addition	
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zi		() Change () Addition	

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: HELEN GUERRY O 04/28/2008