

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90021 006 ****70.00

DOCUMENT # 702751
 1. Entity Name
THE FLORIDA BAR FOUNDATION, INC.



40047121



01152008 Chg-NP CR2E037 (12/06)

Principal Place of Business
 250 SOUTH ORANGE AVENUE - SUITE 600P
 ORLANDO, FL 32801

Mailing Address
 250 SOUTH ORANGE AVENUE - SUITE 600P
 ORLANDO, FL 32801

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

4. FEI Number
 59-1004604

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CURRAN, JANE ELIZABETH
 250 SOUTH ORANGE AVENUE - SUITE 600P
 ORLANDO, FL 32801-0340

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Jane Elizabeth Curran, Executive Director
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD CLARK, NIKKI A 301 SOUTH MONROE ST. RM 313 TALLAHASSEE, FL 32301	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLACKWELL, BRUCE B 25 E PINE ST ORLANDO, FL 32801	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THORNTON, JOHN W JR STE 2770, 200 S. BISCAYNE BLVD MIAMI, FL 33131	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD THOMPSON, EMERSON R JR 300 S. BEACH ST. 5TH DIST. COURT OF AP. DAYTONA BEACH, FL 32114	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCLEROY, KATHLEEN S 4221 W BOYSCOUT BLVD CORP CTR 3 TAMPA, FL 33607	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCLEROY, KATHLEEN 4221 WEST BOY SCOUT BLVD CORP CTR 3 TAMPA, FL 33607	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Second Vice President Noland, John A. PO Box 280 Ft. Myers, FL 33902	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Immediate Past President Thornton, John W. Jr. 11th Judicial Circuit, 1351 NW 12th St, Miami, FL 33125 Suite 317	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Thompson, Emerson R. Jr. PO Box 2816 Windermere, FL 32816-2816	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Elect McLeroy, Kathleen S.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	First Vice President Stone, Adele I. One Financial Plaza, Ste 1400, 100 SE 3rd Ft. Lauderdale, FL 33394	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bruce B Blackwell 407-422-2472
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #