

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709198

FILED
Feb 08, 2011
Secretary of State

Entity Name: LONGACRE FOUNDATION, INC.

Current Principal Place of Business:

802 SW. 7TH AVE
OKEECHOBEE, FL 34974 US

New Principal Place of Business:

Current Mailing Address:

802 SW. 7TH AVE
OKEECHOBEE, FL 34974 US

New Mailing Address:

FEI Number: 59-1100499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, ARLENE
802 SW. 7TH AVE
OKEECHOBEE, FL 34974 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: PTD
Name: MORRIS, ARLENE
Address: 802 SW. 7TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: VD
Name: HUNA, DAVID
Address: 601 CAMELOT
City-St-Zip: BEL AIR, MD 21014

Title: SD
Name: STADELMEYER, CAROL
Address: 1694 W CHERRY CREEK RD
City-St-Zip: MIO, MI 48647

Title: D
Name: HUNA, MARK
Address: 541 PRIESTFORD RD
City-St-Zip: CHURCHVILLE, MD 21028

Title: D
Name: SCOTT, BETTY
Address: 1481 LAKESIDE DR
City-St-Zip: VENICE, FL 34293

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: ARLENE MORRIS

PTD

02/08/2011

Electronic Signature of Signing Officer or Director

Date