

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720378

FILED
Apr 13, 2010
Secretary of State

Entity Name: CONN MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

3410 HENDERSON BLVD
SUITE 200
TAMPA, FL 33609 US

New Principal Place of Business:

Current Mailing Address:

3410 HENDERSON BLVD
SUITE 200
TAMPA, FL 33609 US

New Mailing Address:

FEI Number: 59-0978713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROWDER, SHEFFIELD
3410 HENDERSON BLVD
SUITE 200
TAMPA, FL 33609 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: P
Name: CROWDER, SHEFFIELD L
Address: 1208 S ALBANY ST
City-St-Zip: TAMPA, FL 33606

Title: D
Name: ALTENBERND, CHRIS W
Address: 1700 N TAMPA ST STE 300
City-St-Zip: TAMPA, FL 33602

Title: D
Name: SCOTT, PIEPER
Address: 4211 BOY SCOUT BLVD STE 190
City-St-Zip: TAMPA, FL 33607

Title: VC
Name: HARGETT, JIM JR
Address: 5521 W. SPRUCE ST #C2
City-St-Zip: TAMPA, FL 33607

Title: C
Name: DOYLE, BETH
Address: 275 96TH AVENUE N #8
City-St-Zip: ST PETERSBURG, FL 33702

Title: T
Name: COLLIER, KEN
Address: 4421 CLEAR AVENUE
City-St-Zip: TAMPA, FL 33629

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: SHEFFIELD CROWDER

P

04/13/2010

Electronic Signature of Signing Officer or Director

Date