

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720922

FILED  
Jan 25, 2012  
Secretary of State

**Entity Name:** JOHN E. AND NELLIE J. BASTIEN MEMORIAL FOUNDATION, INC.

**Current Principal Place of Business:**

440 EAST SAMPLE ROAD  
SUITE 209  
POMPANO BEACH, FL 33064 US

**New Principal Place of Business:**

**Current Mailing Address:**

440 EAST SAMPLE ROAD  
SUITE 209  
POMPANO BEACH, FL 33064 US

**New Mailing Address:**

**FEI Number:** 59-6160694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHNEIDER, CAROLYN E  
440 EAST SAMPLE ROAD  
SUITE 209  
POMPANO BEACH, FL 33064 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: T  
Name: SCHNEIDER, CAROLYN E.  
Address: 440 EAST SAMPLE ROAD, SUITE 209  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: T  
Name: PORTER, SCOTT L  
Address: 440 EAST SAMPLE ROAD, SUITE 209  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: T  
Name: LAWSON, JILL T  
Address: 440 EAST SAMPLE ROAD, STE. 209  
City-St-Zip: POMPANO BEACH, FL 33064 US

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: JILL LAWSON

TRUS

01/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date