2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 19, 2008 8:00 am Secretary of State **DOCUMENT # 722378** 1. Entity Name 03-19-2008 90028 010 ****61.25 THE EDWARD C. STUART FOUNDATION INCORPORATED Principal Place of Business Mailing Address P O BOX 250 BARTOW FL 33831 210 E MAIN ST BARTOW FL 33830 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apr. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 59-6142151 Not Applicable Zic Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILSON, DONALD H JR Street Address (P.O. Box Number is Not Acceptable) 245 SOUTH CENTRAL AVE BARTOW FL 33830 City 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and fit oil applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be _ ... Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delate ☐ Change ☐ Addition TERRY, NELLE K.S. NAME NAME 210 E MAIN ST STREET ADDRESS STREET ADDRESS BARTOW FL CITY-ST-ZIP CITY-ST-ZiP TITLE Delete TITLE ☐ Change Addition STUART, WHJR NAME NAME 210 E MAIN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BARTOW FL CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition STUART, NANCY S NAME NAME STREET ADDRESS 210 E MAIN ST STREET ADDPESS BARTOW FL CITY-ST-ZIP CITY-ST-ZIP TD TITLE ☐ Delete TITLE Change ncitibbA 🔲 TERRY, JEAN NAME NAME 210 E MAIN ST STREET ADDRESS STREET ADDRESS BARTOW FL CITY-ST-ZIP CITY-ST-ZIP D 🏿 Change TITLE ☐ Delete TITLE Addition CROSLAND, STUART NAME NAME 1323 STEWART STREET STREET ADDRESS STREET ADDRESS WINTER PARK FL 32789 CITY - ST- ZiP CITY-ST-ZIP ☐ Delete TITLE TITLE 🗹 Addition Divid Southerfield 3515 Lakeside Dr Charlotte NC 38210 NAME NAME STREET ADDRESS STREET ADDRESS

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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 trusted 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 oddress, with all other life empowered.

SIGNATURE:

FILED