

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741327

FILED
Mar 16, 2009
Secretary of State

Entity Name: FLORIDA JAYCEE MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

2000 N. GILMORE AVE.
LAKELAND, FL 33805

New Principal Place of Business:

Current Mailing Address:

2000 N. GILMORE AVE.
LAKELAND, FL 33805

New Mailing Address:

FEI Number: 59-1862407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITMORE, RONALD
1008 GREENBRIAR DR
BRANDON, FL 33511 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 () Delete
Name: KUNTZ, MARIEA
Address: 918 S PARK CT
City-St-Zip: KISSIMMEE, FL 34741

Title: D () Delete
Name: PHILLIPS, MIKE
Address: 7829 FOX SQUIRREL CIRCLE.
City-St-Zip: LAKELAND, FL 33809

Title: T () Delete
Name: WHITMORE, RONALD
Address: 1008 GREENBRIAR DR
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: ACKERMAN, CARYN
Address: 8315 BRANDEIS CIRCLE W
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: ACKERMAN, LARRY
Address: 8315 BRANDEIS CIRCLE W
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: KING, KIT
Address: 25144 SW 2ND AVE
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RONALD G WHITMORE

RA

03/16/2009

Electronic Signature of Signing Officer or Director

Date