

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744946

FILED
Apr 30, 2009
Secretary of State

Entity Name: WORLD SALT FOUNDATION, INC.

Current Principal Place of Business:

6810 LEE STREET
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

6810 LEE STREET
HOLLYWOOD, FL 33024 US

New Mailing Address:

FEI Number: 59-1892298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENING, STEPHEN L
6810 LEE STREET
HOLLYWOOD, FL 33024 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: CD () Delete
Name: BENING, STEPHEN L
Address: 6810 LEE STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: TRACEY, MEEKS
Address: 1977 FLAT BRANCH ROAD
City-St-Zip: TRACY CITY, TN 37381

Title: SD () Delete
Name: MAY, ALBERT C JR
Address: 834 GARDEN STONE CIRCLE
City-St-Zip: TALLMADGE, OH 442781084

Title: TD (X) Delete
Name: MCKEE, RANDY
Address: BOX 602
City-St-Zip: MOLALLA, OR 97038

Title: D (X) Delete
Name: COOK, JOSEPH
Address: 1659 HAWTHORNE AVE
City-St-Zip: EVANSVILLE, IN 47714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
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: STEPHEN L. BENING

CD

04/30/2009

Electronic Signature of Signing Officer or Director

Date