

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750327

FILED
Jan 27, 2009
Secretary of State

Entity Name: HOFFMAN FOUNDATION, INC.

Current Principal Place of Business:

11200 LONGWATER CHASE CT
FT MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

11200 LONGWATER CHASE CT
FT MYERS, FL 33908 US

New Mailing Address:

FEI Number: 59-2003369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, ALFRED JR.
11200 LONGWATER CHASE CT
FORT MYERS, FL 33908 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: PD () Delete
Name: HOFFMAN, ALFRED JR.
Address: 11200 LONGWATER CHASE CT.
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: MITCHELL, STEVE,
Address: ONE TAMPA CENTER STE 2100
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: HOFFMAN, ELISABETH
Address: 40 TWIN PONDS DRIVE
City-St-Zip: FALMOUTH, ME 04105

Title: D () Delete
Name: HOFFMAN, MATTHEW P
Address: 2904 BAYVISTA AVE
City-St-Zip: TAMPA, FL 33611

Title: VD () Delete
Name: HOFFMAN, DAWN D
Address: 11200 LONGWATER CHASE CT
City-St-Zip: FORT MYERS, FL 33908

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
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: ALFRED HOFFMAN JR

PRES

01/27/2009

Electronic Signature of Signing Officer or Director

Date