2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756892

FILED Jan 28, 2011 Secretary of State

Entity Name: LOST TREE VILLAGE CHARITABLE FOUNDATION, INC.

New Principal Place of Business: Current Principal Place of Business:

11555 LOST TREE WAY NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

11555 LOST TREE WAY NORTH PALM BEACH, FL 33408

FEI Number: 59-2104920 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HICKEY, JOSEPH M 11555 LÓST TREE WAY

NORTH PALM BEACH, FL 33408 US

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:

ADAMS, PETER W Name:

Address: 12055 TURTLE BEACH ROAD City-St-Zip: NORTH PALM BEACH, FL 33408

Title: **VTR**

Name: RICHMAN, JOHN M Address: 1083 PALM WAY

City-St-Zip: N. PALM BEACH, FL 33408

Title: **PTR**

HICKEY, JOSEPH M JR. Name: Address: 11260 OLD HARBOUR RD

City-St-Zip: N PALM BCH., FL

Title: STR

Name: BAER, HENRY P MR Address: 732 VILLAGE RD

City-St-Zip: NORTH PALM BEACH, FL 33408

Title:

SHALLCROSS, HOWARD A Name: 11805 TURTLE BEACH ROAD Address: City-St-Zip: NORTH PALM BEACH, FL 33408

Title:

CALCAGNINI, ARTHUR B MRS. Name: Address: 11656 LAKE HOUSE COURT N. PALM BEACH, FL 33408 City-St-Zip:

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.

PRES SIGNATURE: JOSEPH M. HICKEY 01/28/2011