

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006969

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE WARREN AND AUGUSTA HUME FOUNDATION, INC.

Current Principal Place of Business:

700 MELROSE AVENUE, APT 2C
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

700 MELROSE AVENUE, APT 2C
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 13-3675579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHWW, INC.
390 N. ORANGE AVENUE, SUITE 1500
ORLANDO, FL 32801 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: DC () Delete
Name: HUME, WARREN C
Address: 700 MELROSE AVENUE APT 2C
City-St-Zip: WINTER PARK, FL

Title: D () Delete
Name: HUME, AUGUSTA Y
Address: 700 MELROSE AVENUE APT 2C
City-St-Zip: WINTER PARK, FL

Title: D () Delete
Name: BROTHERS, ELIZABETH
Address: 700 MELROSE AVENUE APT 2C
City-St-Zip: WINTER PARK, FL

Title: DT () Delete
Name: CREIGHTON, G RUSSELL
Address: 700 MELROSE AVENUE APT 2C
City-St-Zip: WINTER PARK, FL

Title: D () Delete
Name: WARD, HAROLD A III
Address: 250 PARK AVE, SOUTH 5TH FL
City-St-Zip: WINTER PARK, FL

Title: D () Delete
Name: HUME, NICHOLAS DR
Address: 693 MOUNTAIN DRIVE, N.E.
City-St-Zip: ATLANTA, GA 30342

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:

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: WARREN C. HUME

DC

04/30/2009

Electronic Signature of Signing Officer or Director

Date