2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000421

Entity Name: BUDEK FAMILY FOUNDATION, INC.

FILED Jan 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5580 PETERSON LANE, SUITE 250 4951 GULF SHORES BLVD. NORTH

DALLAS, TX 75240 UNIT #1

NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

5580 PETERSON LANE, SUITE 250 5580 PETERSON LANE DALLAS, TX 75240

SUITE #250

DALLAS, TX 75240

FEI Number: 75-2864970 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:

BUDEK, GARY M BUDEK, GARY M

4951 GULF SHORES BLVD NORTH UNIT 104 4951 GÜLF SHORES BLVD. NORTH

NAPLES, FL 34103 UNIT #1

NAPLES, FL 34103 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: 01/29/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

BUDEK, GARY M Name: Name: Address: 4951 GULF SHORES BLVD NORTH UNIT 104 Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip:

Title: DST () Delete Title: () Change () Addition

Name: BUDEK, PAULA J Name: Address: 4951 GULF SHORES BLVD NORTH UNIT 104 Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

BUDEK, JULIE M Name: BUDEK, JULIE M Name: 4951 GULF SHORES BLVD NORTH UNIT 104 2920 LEEWARD LANE Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

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: GARY M. BUDEK **PRES** 01/29/2009