

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# F03000002606

Entity Name: IN TOUCH FOUNDATION, INC.

Current Principal Place of Business:

3836 DEKALB TECHNOLOGY PARKWAY
ATLANTA, GA 303403604

New Principal Place of Business:

Current Mailing Address:

PO BOX 620362
ATLANTA, GA 30362

New Mailing Address:

FEI Number: 58-2054582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, FREDERICK H ESQ.
234 NORTH WESTMONTE DR, STE 3000
ALTAMONTE SPRINGS, FL 32714 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: S () Delete
Name: REED, BEN F III
Address: 1841 EAST GATE COVE
City-St-Zip: ATLANTA, GA 30338

Title: PRES () Delete
Name: YUNGERBERG, STEVE MR
Address: 379 ATLANTA STREET
City-St-Zip: MARIETTA, GA 30060

Title: DIR () Delete
Name: STANLEY, CHARLES F DR
Address: 3836 DEKALB TECHNOLOGY PKWY
City-St-Zip: ATLANTA, GA 30340

Title: DIR () Delete
Name: TEMPLETON, MAURICE MR
Address: 3836 DEKALB TECHNOLOGY PKWY
City-St-Zip: ATLANTA, GA 30340

Title: DIR () Delete
Name: HANCOCK, DEAN MR
Address: 3836 DEKALB TECHNOLOGY PKWY
City-St-Zip: ATLANTA, GA 30340

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: GLENDA MILLS

Electronic Signature of Signing Officer or Director

CFO

02/23/2009

Date