2008 NOT-FOR-PROFIT CORPORATION

FILED Mar 18, 2008 8:00 am Secretary of State

03-18-2008 90007 029 ****61.25

ANNUAL REPORT

DOCUMENT # F03000005000 THE CAPSTONE FOUNDATION, INC. Principal Place of Business Mailing Address 40047621 284 ROSE ADMINISTRATION BUILDING 284 ROSE ADMINISTRATION BUILDING BOX 870122 BOX 870122 TUSCALOOSA, AL 35487-0122 TUSCALOOSA, AL 35487-0122 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02292008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Numbe Applied For 23-7337238 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. DCEO Addition TITLE ☐ Delete TITLE ☐ Change WITT, ROBERT E NAME STREET ADDRESS 284 ROSE ADMINISTRATION BUILDING STREET ADDRESS CITY-ST-ZIP TUSCALOOSA, AL 354870122 CITY-ST-ZIP Delete TITLE ☐ Change Addition GILBERT, LYNDA 284 ROSE ADMINISTRATION BUILDING STREET ADDRESS STREET ADDRESS TUSCALOOSA, AL 354870122 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition PARKER, PAM NAME NAME STREET ADDRESS 284 ROSE ADMINISTRATION BUILDING STREET ADDRESS CITY-ST-ZIP TUSCALOOSA, AL 354870122 CITY-ST-ZIP TITLE ☐ Change Addition TITLE Delete HULSEY, WILLIAM NAME NAME 284 ROSE ADMINISTRATION BUILDING STREET ADDRESS STREET ADDRESS TUSCALOOSA, AL 354870122 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition OLIVER, JOHN NAME 284 ROSE ADMINISTRATION BUILDING STREET ADDRESS STREET ADDRESS TUSCALOOSA, AL 354870122 CITY-ST-ZIP CITY-ST-ZIP ✓ Addition 🗷 Delete TITLE ☐ Change TITLE MIREE, KATHRYN Campbell, Karen NAME NAME STREET ADDRESS 284 ROSE ADMINISTRATION BUILDING STREET ADDRESS 284 Rose Administration Building

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

TUSCALOOSA, AL 354870122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Tuscaloosa, AL 35487-0122

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

DOC	IMEN	IT #	F03	የበበ	വ	050	በበበ
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1. Entity Name

THE CAPSTONE FOUNDATION, INC.



Principal Place of Business

Mailing Address

284 ROSE ADMINISTRATION BUILDING BOX 870122

TUSCALOOSA, AL 35487-0122

284 ROSE ADMINISTRATION BUILDING BOX 870122 TUSCALOOSA, AL 35487-0122

40047621

02292008 No Chg-NP

CR2E037 (4/06)

Daytime Phone #

4. FEI Number	Applied For
23-7337238	 Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY

1201 HAYS STREET TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

				Ш	THIS STACE		
	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and titl	e il applicable. (NOTE: Registered	Agent signatur	e required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	-		
10,	OFFICERS AND DIRE	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO WITT, ROBERT E 284 ROSE ADMINISTRATION BUILD TUSCALOOSA, AL 354870122	DING	:				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GILBERT, LYNDA 284 ROSE ADMINISTRATION BUILL TUSCALOOSA, AL 354870122	DING					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, PAM 284 ROSE ADMINISTRATION BUILDING TUSCALOOSA, AL 354870122			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HULSEY, WILLIAM 284 ROSE ADMINISTRATION BUILL TUSCALOOSA, AL 354870122	DING		IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLIVER, JOHN 284 ROSE ADMINISTRATION BUILD TUSCALOOSA, AL 354870122	DING					
NTLE NAME STREET ADDRESS CITY-ST-ZIP	D MIREE, KATHRYN 284 ROSE ADMINISTRATION BUIL TUSCALOOSA, AL 354870122	DING					
indicated of the co	I on this report or supplemental report is true	e and accurate and that my signa: red to execute this report as requi	ture shall ha	ive the same legal effe	19, Florida Statutes. I further certify that the information act as if made under oath; that I am an officer or director tes; and that my name appears in Block 10 or Block 11 if		