

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003417

FILED
Jan 30, 2009
Secretary of State

Entity Name: KENNEDY KRIEGER FOUNDATION, INC.

Current Principal Place of Business:

707 BROADWAY
BALTIMORE, MD 21205

New Principal Place of Business:

Current Mailing Address:

707 BROADWAY
BALTIMORE, MD 21205

New Mailing Address:

FEI Number: 52-1734695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK
11380 PROSPERITY FARMS ROAD
#221E
PALM BEACH GARDENS, FL 33410 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: P () Delete
Name: GOLDSTEIN, GARY W MD
Address: 707 N BROADWAY
City-St-Zip: BALTIMORE, MD 21205

Title: VP () Delete
Name: NEUMAN, MICHAEL J
Address: 707 N BROADWAY
City-St-Zip: BALTIMORE, MD 21205

Title: S () Delete
Name: JOHNSTON, MICHAEL MD
Address: 707 N BROADWAY
City-St-Zip: BALTIMORE, MD 21205

Title: T () Delete
Name: ANDERS, JAMES M
Address: 707 N BROADWAY
City-St-Zip: BALTIMORE, MD 21205

Title: D () Delete
Name: COLLINS, ATWOOD III
Address: 707 N BROADWAY
City-St-Zip: BALTIMORE, MD 21205

Title: D () Delete
Name: BAKLOR, SANFORD
Address: 707 N BROADWAY
City-St-Zip: BALTIMORE, MD 21205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HALL, JOY
Address: 707 N BROADWAY
City-St-Zip: BALTIMORE, MD 21205

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: SUZANNE R. SPOONER

D

01/30/2009

Electronic Signature of Signing Officer or Director

Date