

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004049

FILED
Feb 24, 2010
Secretary of State

Entity Name: ANNIKA FOUNDATION, INC.

Current Principal Place of Business:

10524 MOSS PARK RD. 204 #159
ORLANDO, FL 32832

New Principal Place of Business:

9685 LAKE NONA VILLAGE PLACE
SUITE 205
ORLANDO, FL 32827

Current Mailing Address:

800 MAIN STREET
PMB 154
HOLDEN, MA 01520

New Mailing Address:

9685 LAKE NONA VILLAGE PLACE
SUITE 205
ORLANDO, FL 32827

FEI Number: 26-3100887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OCHSENREITER, DON
10524 MOSS PARK RD. 204 #159
ORLANDO, FL 32832 US

Name and Address of New Registered Agent:

OCHSENREITER, DONALD C MR.
9685 LAKE NONA VILLAGE PLACE
SUITE 205
ORLANDO, FL 32827 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: DONALD C. OCHSENREITER

02/24/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM
Name: DUTTON, DANIEL
Address: 9685 LAKE NONA VILLAGE PLACE, SUITE 205
City-St-Zip: ORLANDO, FL 32827

Title: D
Name: SORENSTAM, ANNIKA
Address: 9685 LAKE NONA VILLAGE PLACE, SUITE 205
City-St-Zip: ORLANDO, FL 32827

Title: D
Name: MECHEM, CHARLES
Address: 9685 LAKE NONA VILLAGE PLACE, SUITE 205
City-St-Zip: ORLANDO, FL 32827

Title: T
Name: IACONE-RADAELLI, ANGELA
Address: 9685 LAKE NONA VILLAGE PLACE, SUITE 205
City-St-Zip: ORLANDO, FL 32827

Title: S
Name: SHEETZ, MICHAEL
Address: 9685 LAKE NONA VILLAGE PLACE, SUITE 205
City-St-Zip: ORLANDO, FL 32827

Title: D
Name: STEINBERG, MARK
Address: 9685 LAKE NONA VILLAGE PLACE, SUITE 205
City-St-Zip: ORLANDO, FL 32827

I hereby 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 all other like empowered.

SIGNATURE: DONALD C. OCHSENREITER

PRES

02/24/2010

Electronic Signature of Signing Officer or Director

Date