2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# F93000003459

Entity Name: THE PURCELL FAMILY FOUNDATION, INC.

Current Principal Place of Business:

14155 U. S. HIGHWAY ONE
STE. 310
JUNO BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

14155 U. S. HIGHWAY ONE
STE. 310
JUNO BEACH, FL 33408 US

New Mailing Address:

FEI Number: 16-1425579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PURCELL, JOHN R
14155 U.S. HWY. ONE
STE. 310
JUNO BCH, FL 33408 US

Name and Address of New Registered Agent:

PURCELL, JOHN R
14155 U.S. HWY. ONE
SUITE 310
JUNO BCH, FL 33408 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: _____ 02/18/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VTD ( ) Delete
Name: PURCELL, SHERYL I
Address: 14155 US HWY. ONE STE. 310
City-St-Zip: JUNO BCH, FL 33408

Title: CDPS ( ) Delete
Name: PURCELL, JOHN R
Address: 14155 US HWY ONE STE 310
City-St-Zip: JUNO BEACH, FL 33408

Title: D ( ) Delete
Name: GRONCZEWSKI, SANDY
Address: 14155 US HWY ONE STE 310
City-St-Zip: JUNO BEACH, FL 33408

Title: S (X) Delete
Name: BEH, LAUREL
Address: 14155 US HIGHWAY ONE STE. 310
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VTD (X) Change ( ) Addition
Name: PURCELL, SHERYL I
Address: 14155 US HWY ONE, STE 310
City-St-Zip: JUNO BCH, FL 33408

Title: CDPS (X) Change ( ) Addition
Name: PURCELL, JOHN R
Address: 14155 US HWY ONE, STE 310
City-St-Zip: JUNO BEACH, FL 33408

Title: D (X) Change ( ) Addition
Name: GRONCZEWSKI, SANDY
Address: 14155 US HWY ONE, STE 310
City-St-Zip: JUNO BEACH, FL 33408

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: JOHN R. PURCELL CDPS 02/18/2009
Electronic Signature of Signing Officer or Director — Date