

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001267

FILED  
Apr 06, 2012  
Secretary of State

Entity Name: STONEWALL FOUNDATION, INC.

## Current Principal Place of Business:

1700 S. MACDILL AVE.  
SUITE 220  
TAMPA, FL 33629

## New Principal Place of Business:

1700 S. MACDILL AVE.  
SUITE 220  
TAMPA, FL 33629 UN

## Current Mailing Address:

1700 S. MACDILL AVE.  
SUITE 220  
TAMPA, FL 33629

## New Mailing Address:

FEI Number: 59-3629619      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MURRAY, MICHAEL S  
1700 S. MACDILL AVENUE  
STE 220  
TAMPA, FL 33629 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: DPST  
Name: MURRAY, JAMES K JR  
Address: 1700 S. MACDILL AVE., STE. 220  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: MURRAY, SANDRA H  
Address: 1700 S MACDILL AVE., STE. 220  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: MURRAY, MICHAEL S  
Address: 1700 S MACDILL AVE., STE. 220  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: MURRAY, JAMES K III  
Address: 1700 S. MACDILL AVE., STE. 220  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: LEE, ANTHONY S  
Address: 1700 S. MACDILL AVE., STE. 220  
City-St-Zip: TAMPA, FL 33629

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: MICHA

D

04/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date