

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # N00000007327 1. Entity Name SADDLEBROOK PREP FOUNDATION, INC.	
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Principal Place of Business 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543-4499	Mailing Address 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543-4499
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DO NOT WRITE IN THIS SPACE



03192007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3691356	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RIEHLE, GREGORY R
 5700 SADDLEBROOK WAY
 WESLEY CHAPEL, FL 33543-4499

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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 _____ (NOTE Registered Agent signature required when reappointing) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

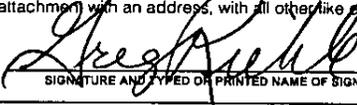
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP RIEHLE, GREGORY ROBERT 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 335434499
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S LEDOUX, ELIZABETH 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 335434499
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ALLEN, DON 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 335434499
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U00000747410
 05/17/07-80024-016 61.25

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  4/27/07 813-907-4481

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #