2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 22, 2007 08:00 AM DOCUMENT # N00000007997 1. Entity Name **Secretary of State** THE MIDDLEBROOK FAMILY FOUNDATION, INC. Principal Place of Business Mailing Address 1654 SABAL PALM DR 1654 SABAL PALM DR **BOCA RATON FL 33432-7443 BOCA RATON FL 33432-7443** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. # etc. 1st MOORE CR2E037 (10/06) City & State City & State 4 FE! Number Applied For 65-1103535 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo KNIGHT, NEAL W 321 ROYAL PONCIANA PLAZA Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 Zip Code FL 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 Signature, typed or printed name of registered agent and tale if applicable (NOTE: Registered Agent signature required when rainstating) **FILE NOW: FEE IS \$61.25** 9. Election Campaign Financing **\$5.00** May Be Make Check Pavable to Trust Fund Contribution Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Mil ☐ Delete TITLE Change ■ Addition NAME MIDDLEBROOK, JANICE V NAME 000000643939 03/02/07-80023-005 61.25 STREET ADDRESS 1654 SABAL PALM DR STREET ADORESS CHY-SI-ZIP CHY-ST-7P **BOCA RATON FL 33432-7443** HIII, ☐ Delete ☐ Change Addition HIII NAMI STEVENSON, WILLIAM \$ NAME STREET ADDRESS STREET ADDRESS 1654 SABAL PALM DR CITY-ST ZIP **BOCA RATON FL 33432-7443** CITY-ST-7IP Detete TITLE DVT ☐ Change ☐ Addition NAMI NAMI MIDDLEBROOK, BRADLEY JR STREET ADDRESS 1654 SABAL PALM DR STREET ADDRESS CITY-St-70 CITY-ST-ZIP **BOCA RATON FL 33432-7443** HHI Defete Change ☐ Addition DV NAME STEVENSON, ROBERT S NAME STREET ADDRESS 1654 SABAL PALM DR STREET ADDRESS CHY-SI-7(P CITY-SI-ZIP **BOCA RATON FL 33432-7443** аш DV ☐ Delete TITLE Change ☐ Addition NAME MIDDLEBROOK, RICHARD C NAME STREET ADDRESS 1654 SABAL PALM DR STREET ADORESS CHY-ST-ZIP CITY-S1-ZIP **BOCA RATON FL 33432-7443** D۷ ☐ Defete HIJE. ☐ Change Addition MIDDLEBROOK, TYLER T NAME STREET ADDRESS STREET ADDRESS 1654 SABAL PALM DR **BOCA RATON FL 33432-7443** CITY-ST-ZIP

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under each; that I am an efficier 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: Hamie 7. Middlebrok to it is a supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an efficier or director of the corporation or the receiver or trustee ompowered to execute this report as required by Chapter 617, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an efficier or director of the corporation or the receiver or trustee ompowered that my signature shall have the same logal effect as if made under oath; that I am an efficier or director of the corporation of