

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000504

FILED
Mar 10, 2012
Secretary of State

Entity Name: THE PONCE DE LEON CONQUISTADORS FOUNDATION, INC.

Current Principal Place of Business:

P.O BOX 510664
PUNTA GORDA, FL 33951

New Principal Place of Business:

Current Mailing Address:

P.O BOX 510664
PUNTA GORDA, FL 33951

New Mailing Address:

FEI Number: 65-1080460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FITZWATER, FOREST M
2555 SILVER PALM
NORTH PORT, FL 34288 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: PRES
Name: YORK, JERRY
Address: 925 GENORA CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: VP
Name: DION, RAYMOND
Address: 2255 PALM TREE DR
City-St-Zip: PUNTA GORDA, FL 33950

Title: S
Name: GOSSETT, KEVIN
Address: 1001 W MARION #18
City-St-Zip: PUNTA GORDA, FL 33950

Title: TRES
Name: FABIAN, STEPHEN M JR
Address: 3367 TRINIDAD DOURT
City-St-Zip: PUNTA GORDA, FL 33950

Title: HIST
Name: FISHER, P.J.
Address: 11250 SW ESSEX, DRIVE
City-St-Zip: LAKE SUZY, FL 34269

Title: D
Name: JONES, JAMES G
Address: 610 VIS FORMIA
City-St-Zip: PUNTA GORDA, FL 33950

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: STEPHEN M. FABIAN JR

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03/10/2012

Electronic Signature of Signing Officer or Director

Date