

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000000757

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** THE UNSINKABLE MOLLY BROWN FOUNDATION, INC.

**Current Principal Place of Business:**

16101 CARENIA LANE  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

16101 CARENIA LANE  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 59-3705642

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KEIM, ALICIA  
16101 CARENIA LANE  
ODESSA, FL 33556 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: PD  
Name: KEIM, ALICIA  
Address: 16101 CARENIA LANE  
City-St-Zip: ODESSA, FL 33556

Title: VTD  
Name: PETERSON, NANCY  
Address: 2402 SOUTH ARDSON PLACE  
City-St-Zip: TAMPA, FL 33629

Title: SD  
Name: NIMPHIUS, ROSALMA  
Address: 16101 CARENIA LANE  
City-St-Zip: ODESSA, FL 3333556

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: NANCY PETERSON

VTD

04/20/2010

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

\_\_\_\_\_  
Date