

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000004927

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** MITCHELL FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

11745 UNICORN ROAD  
TAMPA, FL 33637

**New Principal Place of Business:**

**Current Mailing Address:**

11745 UNICORN ROAD  
TAMPA, FL 33637

**New Mailing Address:**

**FEI Number:** 59-3741243

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MITCHELL, CHARLES R  
11745 UNICORN ROAD  
TAMPA, FL 33637 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:** PTD  
**Name:** MITCHELL, CHARLES R  
**Address:** 11745 UNICORN ROAD  
**City-St-Zip:** TAMPA, FL 33637

**Title:** VSD  
**Name:** MITCHELL, MARGARET  
**Address:** 11745 UNICORN ROAD  
**City-St-Zip:** TAMPA, FL 33637

**Title:** D  
**Name:** MITCHELL, QUINN J  
**Address:** 8416 POINSETTIA DRIVE  
**City-St-Zip:** TEMPLE TERRACE, FL 33637

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:** CHARLES R. MITCHELL

PRES

02/07/2012

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

\_\_\_\_\_  
Date