


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 29, 2007 08:00 AM
Secretary of State

DOCUMENT # N01000005855 1. Entity Name ADRIAN C. FLETCHER AND ANNIE MURIEL FLETCHER FOUNDATION, INC.	
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Principal Place of Business PO BOX 333 GREENSBORO, FL 32330	Mailing Address PO BOX 333 GREENSBORO, FL 32330
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DO NOT WRITE IN THIS SPACE



06192007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3738387	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

**BRIDGES, JANET FLETCHER
128 MATTHEW CLARK RD.
QUINCY, FL 32351**

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by September 14, 2007**

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

000000766780
06/29/07-80003-009 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, GLENDA F PO BOX 605 MARY ESTHER, FL 32569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FENN, ROSALYN F PO BOX 323 GREENSBORO, FL 32330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLETCHER, A. CLARK 511 HOPKINS LANDING QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIDGES, JANET F PO BOX 333 GREENSBORO, FL 32330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VICE, PATRICIA F PO BOX 550 GREENSBORO, FL 32330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Janet Fletcher Bridges **6/19/07** **850 6275614**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #