2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# N01000008736

Entity Name: CORNWALL FOUNDATION, INC.

Current Principal Place of Business:

5150 N TAMIAMI TRL STE 402
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

5150 N TAMIAMI TRL STE 402
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-1159972 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 S. DADELAND BLVD., STE. 508
MIAMI, FL 33156 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 ( ) Delete
Name: GERRY, SANDRA
Address: 5150 TAMIAMI TRL STE 402
City-St-Zip: NAPLES, FL 34103

Title: ATAS ( ) Delete
Name: BOYD, LOUIS J
Address: ONE CABLEVISION CENTER
City-St-Zip: LIBERTY, NY 12754

Title: SD ( ) Delete
Name: GERRY, ADAM
Address: 5150 TAMIAMI TRL STE 402
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GERRY, SANDRA
Address: 5150 N TAMIAMI TRL, STE 402
City-St-Zip: NAPLES, FL 34103

Title: TAS (X) Change ( ) Addition
Name: BOYD, LOUIS J
Address: ONE CABLEVISION CENTER
City-St-Zip: LIBERTY, NY 12754

Title: SD (X) Change ( ) Addition
Name: GERRY, ADAM
Address: 5150 N TAMIAMI TRL, STE 402
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LOUIS J. BOYD T 04/21/2009

Electronic Signature of Signing Officer or Director — Date