

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01115

FILED
Jan 07, 2010
Secretary of State

Entity Name: THE JAMES REEVES KAYLOR MEMORIAL FOUNDATION, INC

Current Principal Place of Business:

C/O JOEL HIRSCHHORN
550 BILTMORE WAY PH3A
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

C/O JOEL HIRSCHHORN
550 BILTMORE WAY PH3A
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 59-2359415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIRSCHHORN, JOEL
550 BILTMORE WAY PH3A
CORAL GABLES, FL 33134 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: KAYLOR, R. JAMES
Address: 1120 VILLAGE RD #4, P.O BOX 4179
City-St-Zip: AVON, CO 81620

Title: STD
Name: KAYLOR, DIANA
Address: 1120 VILLAGE RD #4, P.O BOX 4179
City-St-Zip: AVON, CO 81620

Title: D
Name: HIRSCHBORN, JOEL
Address: 550 BILTMORE WAY PH3A
City-St-Zip: CORAL GABLES, FL 33134

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: R. JAMES KAYLOR

PRES

01/07/2010

Electronic Signature of Signing Officer or Director

Date