

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000576

FILED  
Mar 11, 2011  
Secretary of State

**Entity Name:** BUENA VIDA FOUNDATION, INC.

**Current Principal Place of Business:**

2129 W. NEW HAVEN AVENUE  
WEST MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

2129 W. NEW HAVEN AVENUE  
WEST MELBOURNE, FL 32904

**New Mailing Address:**

**FEI Number:** 30-0060190

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BISHOP, RALPH  
2129 W. NEW HAVEN AVENUE  
WEST MELBOURNE, FL 32904 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:** PRES  
**Name:** MACE, MARY  
**Address:** 2129 W. NEW HAVEN AVENUE  
**City-St-Zip:** WEST MELBOURNE, FL 32904

**Title:** TRES  
**Name:** JACOBS, MADELINE  
**Address:** 2129 W. NEW HAVEN AVENUE  
**City-St-Zip:** WEST MELBOURNE, FL 32904

**Title:** SEC  
**Name:** BARTON, BLAINE  
**Address:** 2129 W. NEW HAVEN AVENUE  
**City-St-Zip:** WEST MELBOURNE, FL 32904

**Title:** VP  
**Name:** WHITTAKER, KEN  
**Address:** 2129 W. NEW HAVEN AVENUE  
**City-St-Zip:** WEST MELBOURNE, FL 32904

**Title:** D  
**Name:** SPALDING, DONALD  
**Address:** 2129 W. NEW HAVEN AVENUE  
**City-St-Zip:** WEST MELBOURNE, FL 32904

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:** MADELINE JACOBS

TRES

03/11/2011

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

\_\_\_\_\_  
Date