

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001528

FILED
Feb 17, 2009
Secretary of State

Entity Name: LUCILLE ATWELL FOUNDATION, INC.

Current Principal Place of Business:

2600 N.E. 14TH STREET CAUSEWAY
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

2600 N.E. 14TH STREET CAUSEWAY
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 72-1522109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, W. THORNTON ESQ.
C/O MACLEAN AND EMA
2600 NE 14TH STREET CAUSEWAY
POMPANO BEACH, FL 33062 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: MACLEAN, FREDERICK R
Address: 2600 NE 14TH STREET CAUSEWAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: VD () Delete
Name: BLACK, LIANE
Address: 7525 NW 61ST TERRACE, #101
City-St-Zip: PARKLAND, FL 33067

Title: SD () Delete
Name: MACLEAN, ANNE B
Address: 2600 NE 14TH STREET CAUSEWAY
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FREDERICK R. MACLEAN

PD

02/17/2009

Electronic Signature of Signing Officer or Director

Date