


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 08:00 AM
Secretary of State

DOCUMENT # N02000001599
 1. Entity Name
SANDERLIN FOUNDATION, INC.



Principal Place of Business Mailing Address
738 RUGBY STREET **738 RUGBY STREET**
ORLANDO, FL 32804 **ORLANDO, FL 32804**

DO NOT WRITE IN THIS SPACE



01192004 No Chg-NP CR2E037 (10/03)

4. FEI Number
03-0437117 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
RUBINO, NICHOLAS J
159 LOOKOUT PLACE, SUITE 101
MAITLAND, FL 32751

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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 returning) DATE

Filing Fee is \$61.25
Due by May 1, 2004

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

U00000105935
 04/07/04-80046-006 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD SANDERLIN, WALDRON 738 RUGBY STREET ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VO SQUILLANTE, JUDITH 738 RUGBY STREET ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD SANDERLIN, JOANNE 738 RUGBY STREET ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D HAMMOCK, JIM 159 LOOKOUT PLACE, SUITE 101 MAITLAND, FL 32751
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D ROUHER, JANET 738 RUGBY STREET ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D SANDERLIN, JACQUELINE 3225 GREENS AVE ORLANDO, FL 32804

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(6), 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: Judy Spilled 4/5/04 546-1500
Signature and typed or printed name of signing officer or director Date Daytime Phone #