

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001599

FILED
Apr 06, 2009
Secretary of State

Entity Name: SANDERLIN FOUNDATION, INC.

Current Principal Place of Business:

738 RUGBY STREET
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

738 RUGBY STREET
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 03-0437117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERLIN, WALDRON M
738 RUGBY STREET
ORLANDO, FL 32804 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: SANDERLIN, WALDRON
Address: 738 RUGBY STREET
City-St-Zip: ORLANDO, FL 32804

Title: VD () Delete
Name: SQUILLANTE, JUDITH
Address: 738 RUGBY STREET
City-St-Zip: ORLANDO, FL 32804

Title: SD () Delete
Name: SANDERLIN, JOANNE
Address: 738 RUGBY STREET
City-St-Zip: ORLANDO, FL 32804

Title: D (X) Delete
Name: HAMMOCK, JIM
Address: 159 LOOKOUT PLACE, SUITE 101
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: ROUHIER, JANET
Address: 738 RUGBY STREET
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: SANDERLIN, JACQUELINE
Address: 3225 GREENS AVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: SANDERLIN, JO ANNE
Address: 738 RUGBY STREET
City-St-Zip: ORLANDO, FL 32804

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: WALDRON M SANDERLIN

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date