

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002870

FILED  
Mar 03, 2009  
Secretary of State

**Entity Name:** ENTERPRISE CHARLOTTE FOUNDATION, INC.

**Current Principal Place of Business:**

18501 MURDOCK CIR., SUITE 502  
PORT CHARLOTTE, FL 339481039

**New Principal Place of Business:**

**Current Mailing Address:**

18501 MURDOCK CIR., SUITE 502  
PORT CHARLOTTE, FL 339481039

**New Mailing Address:**

**FEI Number:** 71-0878942

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROOT, DONALD E  
18501 MURDOCK CIR STE 502  
PORT CHARLOTTE, FL 339481039 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: DIEDRICK, LANE  
Address: 1111 S. MCCALL RD.  
City-St-Zip: ENGLEWOOD, FL 34223

Title: D ( ) Delete  
Name: MESSINA, ANDREA  
Address: 1445 EDUCATION WAY  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: DV ( ) Delete  
Name: RICE, THOMAS  
Address: 21298 OLEAN BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33949

Title: DST ( ) Delete  
Name: ROOT, DONALD E  
Address: 18501 MURDOCK CIR STE 502  
City-St-Zip: PORT CHARLOTTE, FL 339481039

**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:

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: DONALD E ROOT

DST

03/03/2009

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

\_\_\_\_\_  
Date