

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003738

FILED
Jan 30, 2006
Secretary of State

Entity Name: THE NORRELL FAMILY FOUNDATION, INC.

Current Principal Place of Business:

9239 SE 171ST COOPER LOOP
THE VILLAGES, FL 321621814 US

New Principal Place of Business:

Current Mailing Address:

9239 SE 171ST COOPER LOOP
THE VILLAGES, FL 321621814 US

New Mailing Address:

FEI Number: 55-0803856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORRELL, THOMAS E
9239 SE 171ST COOPER LOOP
THE VILLAGES, FL 321621814 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: DP () Delete
Name: NORRELL, THOMAS E
Address: 9239 SE 171ST COOPER LOOP
City-St-Zip: THE VILLAGES, FL 321621814 US

Title: DS () Delete
Name: NORRELL, KIM
Address: 9239 SE 171ST COOPER LOOP
City-St-Zip: THE VILLAGES, FL 321621814 US

Title: D () Delete
Name: NORRELL, NGUYEN J
Address: 3870 BRUSHY MILL CT
City-St-Zip: LOGANVILLE, GA 30052

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 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: THOMAS E NORRELL

P

01/30/2006

Electronic Signature of Signing Officer or Director

Date