

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006902

FILED
May 01, 2008
Secretary of State

Entity Name: MDM FOUNDATION INC.

Current Principal Place of Business:

4781 N CONGRESS AVE #109
BOYNTON BCH, FL 33426

New Principal Place of Business:

Current Mailing Address:

4781 N CONGRESS AVE #109
BOYNTON BCH, FL 33426

New Mailing Address:

FEI Number: 14-1879428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC.
941 FOURTH ST
MIAMI BCH, FL 33139 US

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: NICHOLS-JONES, DONA P
Address: 4781 NO. CONGRESS AVE. #109
City-St-Zip: BOYNTON BEACH, FL 33426

Title: DVP () Delete
Name: JONES, MIKEL
Address: 4781 NO. CONGRESS AVE #109
City-St-Zip: BOYNTON BEACH, FL 33426

Title: DS () Delete
Name: NICHOLS, PAULETTE
Address: 4781 NO. CONGRESS AVE. #109
City-St-Zip: BOYNTON BEACH, FL 33426

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: DONA NICHOLS-JONES

DP

05/01/2008

Electronic Signature of Signing Officer or Director

Date