

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001454

FILED
Apr 07, 2009
Secretary of State

Entity Name: CORY SOLES FOUNDATION, INC.

Current Principal Place of Business:

415 16TH AVENUE, SOUTH
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

37433 OLD PINERIDGE ROAD
HILLIARD, FL 32046

Current Mailing Address:

415 16TH AVENUE, SOUTH
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

37433 OLD PINERIDGE ROAD
HILLIARD, FL 32046

FEI Number: 59-3766443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKEL, EDWARD C
ONE INDEPENDENT DRIVE, SUITE 2301
JACKSONVILLE, FL 32202 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: D () Delete
Name: SOLES-SMITH, DEBBIE
Address: 415 16TH AVENUE, SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: SOLES, ERIC
Address: 590 MAY STREET, SOUTH
City-St-Zip: BALDWIN, FL 32234

Title: D () Delete
Name: SMITH, JERRY A
Address: 415 16TH AVENUE, SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SOLES-SMITH, DEBBIE
Address: 37433 OLD PINERIDGE ROAD
City-St-Zip: HILLIARD, FL 32046

Title: D (X) Change () Addition
Name: SOLES, ERIC
Address: 580 MAY STREET, SOUTH
City-St-Zip: BALDWIN, FL 32234

Title: D (X) Change () Addition
Name: SMITH, JERRY A
Address: 37433 OLD PINERIDGE ROAD
City-St-Zip: HILLIARD, FL 32046

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: DEBBIE SOLES-SMITH

D

04/07/2009

Electronic Signature of Signing Officer or Director

Date