2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003401

FILED Feb 12, 2010 Secretary of State

Entity Name: CARIBBEAN COMMUNITY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

20 N. ORANGE AVE. 20 NORTH ORANGE AVENUE

SUITE 600 SUITE 600

ORLANDO, FL 32801 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

20 N. ORANGE AVE. 20 NORTH ORANGE AVENUE

SUITE 600 SUITE 600

ORLANDO, FL 32801 ORLANDO, FL 32801

FEI Number: 51-0463101 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HENDRY, STONER & BROWN, P.A.
20 NORTH ORANGE AVE
SUITE 600

HENDRY, STONER & BROWN, P.A.
20 NORTH ORANGE AVENUE
SUITE 600

ORLANDO, FL 32801 US ORLANDO, FL 32801 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: ROBERT R. HENDRY, PRESIDENT 02/12/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: STD

Name: PASQUARELLI, DAVID A
Address: 38 SPRINGVIEW DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: DVP

Name: HENDRY, ROBERT R

Address: 20 NORTH ORANGE AVE SUITE 600

City-St-Zip: ORLANDO, FL 32801

Title: PD

Name: SCHMELING, DAVID G
Address: 2516 CHAMBERLIN DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D

Name: BREWER, CYRILDA D Address: 2037 WAHALAW NENE City-St-Zip: TALLAHASSEE, FL 32301

I hereby 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 all other like empowered.

SIGNATURE: DAVID A. PASQUARELLI STD 02/12/2010