2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004898

FILED Jan 09, 2007 Secretary of State

Entity Name: CATHERINE L. AND WARD S. STRUBLE FOUNDATION, INC.

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

356 CROMWELL COURT 663 HICKORY RD
NAPLES, FL 34108 NAPLES, FL 34108

Current Mailing Address: New Mailing Address:

356 CROMWELL COURT 663 HICKORY RD NAPLES, FL 34108 NAPLES, FL 34108

FEI Number: 68-0558513 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:

STRUBLE, CATHERINE L
356 CROMWELL COURT
NAPLES, FL 34108 US
STRUBLE, CATHERINE L
663 HICKORY RD
NAPLES, FL 34108 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: CATHERINE STRUBLE 01/09/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

Name: LOWDER, CHARLOTTE G Name:

 Address:
 2080 BELL RD.
 Address:

 City-St-Zip:
 MONTGOMERY, AL 36117
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition Name: COTNEY, BRYAN T Name: COTNEY, BRYAN T

Address: 1823 CRAYTON RD Address: 2080 BELL RD
City-St-Zip: NAPLES, FL 34102 City-St-Zip: MONTGOMERY, AL 36108

Title: D () Delete Title: D (X) Change () Addition

Name:STRUBLE, CATHERINE LName:STRUBLE, CATHERINE LAddress:356 CROMWELL COURTAddress:663 HICKORY RDCity-St-Zip:NAPLES, FL 34108City-St-Zip:NAPLES, FL 34108

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: CATHERINE STRUBLE D 01/09/2007