2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# N03000009960

Entity Name: EUGENE LAMB, JR. FOUNDATION INC.

Current Principal Place of Business:

158 HAYWARD DUPONT ST
MIDWAY, FL 32343 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 953
MIDWAY, FL 32342 US

New Mailing Address:

FEI Number: 86-1087552 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMB, DELORIS
158 HAYWARD-DUPONT STREET
MIDWAY, FL 32343 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:	P	( ) Delete
Name:	LAMB, DELORIS	
Address:	P O BOX 953	
City-St-Zip:	MIDWAY, FL 32342 US	
Title:	V	( ) Delete
Name:	FRANKLIN, FREDDIE	
Address:	43 GREENLIN VILLA RD	
City-St-Zip:	CRAWFORDVILLE, FL 32327 US	
Title:	S	( ) Delete
Name:	LAMB, ROLANDA D	
Address:	165 SOUTHERN BRIDGE BLVD, UNIT 2	
City-St-Zip:	JACKSONVILLE, FL 32259 US	
Title:	M	( ) Delete
Name:	ROSS, VERNELL	
Address:	P O BOX 902	
City-St-Zip:	HAVANA, FL 32333 US	
Title:	M	( ) Delete
Name:	CHAPMAN, DAVID	
Address:	908 WASHINGTON STREET	
City-St-Zip:	TALLAHASSEE, FL 32303 US	

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:	
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: DELORIS LAMB P 02/23/2009

Electronic Signature of Signing Officer or Director — Date