

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010146

FILED
Jul 01, 2009
Secretary of State

Entity Name: STETSON KENNEDY FOUNDATION, INC.

Current Principal Place of Business:

BELUTHAHATCHEE
1523 SR 13
FRUIT COVE, FL 32259

New Principal Place of Business:

Current Mailing Address:

BELUTHAHATCHEE
1523 SR 13
FRUIT COVE, FL 32259

New Mailing Address:

FEI Number: 22-3899015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

STETSON, KENNEDY
BELUTHAHATCHEE
1523 SR 13
FRUIT COVE, FL 32259 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: P () Delete
Name: KENNEDY, STETSON
Address: 1523 STATE RD 13
City-St-Zip: FRUIT COVE, FL 32259

Title: VP () Delete
Name: EVANS, J. RANDALL
Address: 1894 EDGEWOOD AVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

Title: T () Delete
Name: COOK, HAMILTON
Address: 1301 RIVERPLACE BLVD.,#2254
City-St-Zip: JACKSONVILLE, FL 32207

Title: DBM () Delete
Name: ALEXANDER, CAROL
Address: 9550 BEAUCLERC COVE ROAD
City-St-Zip: FRUIT COVE, FL 32259

Title: DBM () Delete
Name: CROOKS, JAMES
Address: 9550 BEAUCLERC COVE ROAD
City-St-Zip: FRUIT COVE, FL 32259

Title: DBM () Delete
Name: DANFORD, RICHARD
Address: 903 W. UNION STREET
City-St-Zip: JACKSONVILLE, FL 32204

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:

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: STETSON KENNEDY

P

07/01/2009

Electronic Signature of Signing Officer or Director

Date