

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001064

FILED
Apr 29, 2009
Secretary of State

Entity Name: WISH FAMILY FOUNDATION INC.

Current Principal Place of Business:

851 R. SR 434, SUITE 176
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

851 R. SR 434, SUITE 176
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 90-0105547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMBEE, PAUL B
7825 GEORGE ANN ST.
WINTER PARK, FL 32792 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: PTD () Delete
Name: TRENT, DANIELLE D
Address: 851 R. SR 434, SUITE 176
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: ZIPAY, DICK
Address: 103 ANTHONY DR.
City-St-Zip: SANFORD, FL 32773

Title: SD () Delete
Name: COMBEE, PAUL
Address: 7825 GEORGE ANN ST.
City-St-Zip: WINTER PARK, FL 32792

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:

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: DANIELLE TRENT

PTD

04/29/2009

Electronic Signature of Signing Officer or Director

Date