2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# N04000001216

Entity Name: FOUNDERS' DAY~FLORIDA STYLE, INC.

Current Principal Place of Business:

2629 NEZ PERCE TRAIL
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2629 NEZ PERCE TRAIL
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-0561241 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INGRAM, KAREN R
2629 NEZ PERCE TRAIL
TALLAHASSEE, FL 32303 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: VD ( ) Delete
Name: NYMAN, PHILLIP
Address: 2719 WEST THARPE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: PD ( ) Delete
Name: INGRAM, KAREN R
Address: 2629 NEZ PERCE TRAIL
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD ( ) Delete
Name: SANNEMAN, AMANDA
Address: 928 HAWTHORNE STREET
City-St-Zip: TALLAHASSEE, FL 32308

Title: VTD ( ) Delete
Name: WISNEWSKI, PAUL
Address: 1317 LINDA ANN ROAD
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VTD (X) Change ( ) Addition
Name: MENDOZA, KATHERINE
Address: 2808 MCARTHUR STREET
City-St-Zip: TALLAHASSEE, FL 32310

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: WISNEWSKI, PAUL
Address: 1317 LINDA ANN ROAD
City-St-Zip: TALLAHASSEE, FL 32304

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: KAREN INGRAM PD 01/15/2008

Electronic Signature of Signing Officer or Director — Date