

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 02, 2008
Secretary of State

DOCUMENT# N04000007135

Entity Name: THE ELS AND BILL VAN ENGELENBURG CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**7 INDIAN RIVER AVE
APT 1204
TITUSVILLE, FL 32796**New Principal Place of Business:****Current Mailing Address:**7 INDIAN RIVER AVE
APT 1204
TITUSVILLE, FL 32796**New Mailing Address:****FEI Number:** 20-1406569**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VAN ENGELENBURG, W C
7 INDIAN RIVER AVENUE
APT 1204
TITUSVILLE, FL 32796 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: D () Delete
Name: VAN ENGELENBURG, W C
Address: 7 INDIAN RIVER AVE APT 1204
City-St-Zip: TITUSVILLE, FL 32796

Title: D () Delete
Name: VAN ENGELENBURG, ELTJE HENDRIKA
Address: 7 INDIAN RIVER AVE APT 1204
City-St-Zip: TITUSVILLE, FL 32796

Title: D () Delete
Name: VAN ENGELENBURG, W.C.VII
Address: 26452 137TH AVE SE
City-St-Zip: KENT, WA 98042

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: VAN ENGELENBURG, W.C.VII
Address: 25302 139TH PLACE SE
City-St-Zip: KENT, WA 98042

Title: D () Change (X) Addition
Name: DEFRIES, DIANE
Address: 26452 137TH AVE SE
City-St-Zip: KENT, WA 98042

Title: D () Change (X) Addition
Name: JONES, HARRY A
Address: 1901 S HARBOR CITY BLVD, #500
City-St-Zip: MELBOURNE, FL 32901

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: W C VAN ENGELENBURG

D

06/02/2008

Electronic Signature of Signing Officer or Director

Date