2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000007714

RI FILED Jan 17, 2007 Secretary of State

Entity Name: STREFLING FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 555 5TH AVENUE NE ST PETERSBURG, FL 33701 **Current Mailing Address: New Mailing Address:** 555 5TH AVENUE NE P. O. BOX 2875 ELKHART, IN 46515 ST. PETERSBURG, FL 33701 FEI Number: 42-1641253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CFRA, LLC CORPORATE CENTER THREE AT INTL. PLAZA 4221 W. BOY SCOUT BOULEVARD, SUITE 1000 TAMPA, FL 33607 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STREFLING, RICHARD W Name: Name: 555 5TH AVENUE, NE Address: Address: City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: Title: DST () Delete Title: () Change () Addition STREFLING, RITA J Name: Name: Address: 555 5TH AVENUE. NE Address: City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: Title: () Delete Title: () Change () Addition NOLEN, GARY D Name: Name: 5920 BOXWOOD DRIVE, E Address: Address: City-St-Zip: SOUTH BEND, IN 46614 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LUDWIG, ALAN Name: Address: 55755 C.R. 27 Address: City-St-Zip: BRISTOL, IN 46607 City-St-Zip: Title: () Delete Title: () Change () Addition EDMUNDSON, JAMES Name: Name: 21342 CHERI LANE Address: Address: City-St-Zip: BRISTOL, IN 46607 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD W. STREFLING DP 01/17/2007