

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008888

FILED  
Jan 16, 2007  
Secretary of State

**Entity Name:** THE WILLIAM C. EULER, JR. AND THE ANDREW F. OATES, JR., FOUNDATION, INC.

**Current Principal Place of Business:**

1510 LAIRD STREET  
KEY WEST, FL 32040

**New Principal Place of Business:**

1309 CATHERINE ST.  
KEY WEST, FL 32040

**Current Mailing Address:**

1510 LAIRD STREET  
KEY WEST, FL 32040

**New Mailing Address:**

1309 CATHERINE ST.  
KEY WEST, FL 32040

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OATES, ANDREW F JR  
1510 LAIRD STREET  
KEY WEST, FL 32040 US

**Name and Address of New Registered Agent:**

OATES, ANDREW F JR  
1309 CATHERINE ST.  
KEY WEST, FL 32040 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:

01/16/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: OATES, ANDREW F JR  
Address: 1510 LAIRD STREET  
City-St-Zip: KEY WEST, FL 32040

Title: DS ( ) Delete  
Name: SHAW, CHARLES  
Address: 2417 SEIDENBERG AVE  
City-St-Zip: KEY WEST, FL 33040

Title: DV ( ) Delete  
Name: GILCHRIST, BRYAN  
Address: 2417 SEIDENBERG AVE  
City-St-Zip: KEY WEST, FL 33040

Title: T ( ) Delete  
Name: OATES, ANDREW F JR  
Address: 1510 LAIRD STREET  
City-St-Zip: KEY WEST, FL 32040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: OATES, ANDREW F JR  
Address: 1309 CATHERINE ST.  
City-St-Zip: KEY WEST, FL 32040

Title: DS (X) Change ( ) Addition  
Name: SHAW, CHARLES  
Address: 1510 LAIRD ST.  
City-St-Zip: KEY WEST, FL 33040

Title: DV (X) Change ( ) Addition  
Name: GILCHRIST, BRYAN  
Address: 1510 LAIRD ST.  
City-St-Zip: KEY WEST, FL 33040

Title: T (X) Change ( ) Addition  
Name: OATES, ANDREW F JR  
Address: 1309 CATHERINE ST.  
City-St-Zip: KEY WEST, FL 32040

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: BRYAN GILCHRIST

DV

01/16/2007

Electronic Signature of Signing Officer or Director

Date