2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# N04000010418

Entity Name: JACOBUS FAMILY FOUNDATION, INC.

Current Principal Place of Business:

1177 GEO BUSH BLVD
#307
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

1177 GEO BUSH BLVD
#307
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 20-1843239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRATT, DAVID ESQ.
2255 GLADES ROAD
SUITE 340 WEST
BOCA RATON, FL 33431 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/P	( ) Delete
Name:	JACOBUS, GEORGE H	
Address:	1177 GEO BUSH BLVD	
City-St-Zip:	DELRAY BEACH, FL 33483	
Title:	D/VP	( ) Delete
Name:	JACOBUS, CATHERINE H	
Address:	1177 GEO BUSH BLVD	
City-St-Zip:	DELRAY BEACH, FL 33483	
Title:	D	( ) Delete
Name:	PRATT, DAVID ESQ.	
Address:	2255 GLADES ROAD #340 WEST	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	D	( ) Delete
Name:	COOK, ALEXANDRA B	
Address:	8 WHITTIER PLACE #16K	
City-St-Zip:	BOSTON, MA 02115	
Title:	D	( ) Delete
Name:	JACOBUS, CHRISTIAN H	
Address:	3656 HERSCHEL AVENUE	
City-St-Zip:	CINCINNATI, OH 45208	
Title:	T	( ) Delete
Name:	TESKE, LEON E	
Address:	1177 GEO BUSH BLVD	
City-St-Zip:	DELRAY BEACH, FL 33483	

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:	
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: LEON E TESKE T 01/07/2008

Electronic Signature of Signing Officer or Director — Date