

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010895

FILED  
Feb 10, 2008  
Secretary of State

**Entity Name:** THE MYRNA MUNROE FOUNDATION FOR DISADVANTAGED CHILDREN, INC.

**Current Principal Place of Business:**

3402 E. DEBAZAN AVE.  
ST. PETE BCH, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

3402 E. DEBAZAN AVE.  
ST. PETE BCH, FL 33706

**New Mailing Address:**

**FEI Number:** 02-0733815

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUNROE, BARRIE S  
3402 E. DEBAZAN AVE.  
ST. PETE BCH, FL 33706 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: PD ( ) Delete  
Name: MUNROE, BARRIE S  
Address: 3402 E. DEBAZAN AVE.  
City-St-Zip: ST. PETE BCH, FL 33706

Title: SD ( ) Delete  
Name: MUNROE, JAMES B  
Address: 199 21ST AVE.  
City-St-Zip: ST. PETE BCH, FL 33706

Title: T ( ) Delete  
Name: YOUNG, RAND  
Address: 100 N FEDERAL HWY PH1522  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D ( ) Delete  
Name: SIMKO, COLLEEN  
Address: 521-77TH AVE  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: D ( ) Delete  
Name: WOLF, MICHELLE  
Address: 6116 KIPPS COLONY DR W  
City-St-Zip: GULFPORT, FL 33707

Title: D ( ) Delete  
Name: SKINNER, TERI  
Address: 1117 PINELLAS BAYWAY #208  
City-St-Zip: TIERRA VERDE, FL 33715

**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: BARRIE S MUNROE

PRES

02/10/2008

Electronic Signature of Signing Officer or Director

Date