2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N04000011801

Entity Name: SHIN FOUNDATION, INC.

Current Principal Place of Business:

5201 S WESTSHORE BLVD
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

5201 S WESTSHORE BLVD
TAMPA, FL 33611

New Mailing Address:

FEI Number: 20-4924958 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHIN, SUE
5201 S WESTSHORE BLVD
TAMPA, FL 33611 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: SHIN, DAE
Address: 5201 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete
Name: SHIN, JANE
Address: 5201 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete
Name: KRUEGER, KEVIN B
Address: 2111 N 15TH STREET
City-St-Zip: TAMPA, FL 336053647

Title: D ( ) Delete
Name: SHIN, SUE
Address: 5201 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete
Name: SHIN, KIM
Address: 5201 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33611

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:

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: SUE SHIN D 04/30/2008
Electronic Signature of Signing Officer or Director — Date