

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011965

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** ANDERSON CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

2111 WEST SWANN AVE.  
SUITE 200  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

2111 WEST SWANN AVE., SUITE 200  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** 20-2054920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DAIGLE, ELLEN D  
2111 WEST SWANN AVENUE, SUITE 200  
TAMPA, FL 33606 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: PSTD  
Name: ANDERSON, STEVEN G  
Address: 2111 WEST SWANN AVENUE, SUITE 200  
City-St-Zip: TAMPA, FL 33606 US

Title: D  
Name: ANDERSON, ANNE  
Address: 2111 WEST SWANN AVENUE, SUITE 200  
City-St-Zip: TAMPA, FL 33606 US

Title: D  
Name: ANDERSON, JAMES W  
Address: 2111 WEST SWANN AVENUE, SUITE 200  
City-St-Zip: TAMPA, FL 33606 US

I hereby 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 all other like empowered.

SIGNATURE: STEVEN G. ANDERSON

PSTD

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date