

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012053

FILED
Apr 14, 2009
Secretary of State

Entity Name: PAUL B. HUNTER AND CONSTANCE D. HUNTER CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

150 SOUTH PALMETTO AVENUE
SUITE A
DAYTONA BEAH, FL 32114

New Principal Place of Business:

150 SOUTH PALMETTO AVENUE
SUITE 300
DAYTONA BEAH, FL 32114

Current Mailing Address:

150 SOUTH PALMETTO AVENUE
SUITE A
DAYTONA BEAH, FL 32114

New Mailing Address:

150 SOUTH PALMETTO AVENUE
SUITE 300
DAYTONA BEAH, FL 32114

FEI Number: 20-2155550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUMBLESON, J. DOYLE ESQ.
150 SOUTH PALMETTO AVENUE
SUITE A
DAYTONA BEAH, FL 32114 US

Name and Address of New Registered Agent:

TUMBLESON, J. DOYLE ESQ.
150 SOUTH PALMETTO AVENUE
SUITE 300
DAYTONA BEAH, FL 32114 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: J. DOYLE TUMBLESON

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: HUNTER, CONSTANCE D
Address: 12329 S. ATLANTIC AVENUE
City-St-Zip: PONCE INLET, FL 32127

Title: D,T () Delete
Name: BECKS, KATHRYN F
Address: 800 S. NOVA ROAD, SUITE Q
City-St-Zip: ORMOND BEACH, FL 32174

Title: D,S () Delete
Name: TUMBLESON, J. DOYLE
Address: 150 SOUTH PALMETTO AVENUE, SUITE A
City-St-Zip: DAYTONA BEAH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: HUNTER, CONSTANCE D
Address: 4329 S. ATLANTIC AVENUE
City-St-Zip: PONCE INLET, FL 32127

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D,S (X) Change () Addition
Name: TUMBLESON, J. DOYLE
Address: 150 SOUTH PALMETTO AVENUE, SUITE 300
City-St-Zip: DAYTONA BEAH, FL 32114

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: J. DOYLE TUMBLESON

D,S

04/14/2009

Electronic Signature of Signing Officer or Director

Date