

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012117

FILED
Apr 16, 2009
Secretary of State

Entity Name: SMIGIEL FOUNDATION TO BENEFIT CHILDREN AND FAMILIES, INC.

Current Principal Place of Business:

P.O. BOX 540669
LAKE WORTH, FL 33454 US

New Principal Place of Business:

4460 LYONS ROAD
LAKE WORTH, FL 33467 US

Current Mailing Address:

P.O. BOX 540669
LAKE WORTH, FL 33454 US

New Mailing Address:

FEI Number: 20-2074054 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMIGIEL, GARY
4460 LYONS ROAD
LAKE WORTH, FL 33467 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: SMIGIEL, GARY
Address: PO BOX 540669
City-St-Zip: LAKE WORTH, FL 33454 US

Title: D () Delete
Name: FOUNTAIN, DOUGLAS
Address: 4460 LYONS ROAD
City-St-Zip: LAKE WORTH, FL 33467 US

Title: D () Delete
Name: FOUNTAIN, JANE
Address: 4460 LYONS ROAD
City-St-Zip: LAKE WORTH, FL 33467 US

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:

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: GARY SMIGIEL

RA

04/16/2009

Electronic Signature of Signing Officer or Director

Date