

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04516

FILED  
Feb 15, 2010  
Secretary of State

Entity Name: SACRED HEART FOUNDATION, INC.

**Current Principal Place of Business:**

5151 N. 9TH AVENUE  
PAYNE BLDG, STE 260  
PENSACOLA, FL 32504 US

**New Principal Place of Business:**

**Current Mailing Address:**

5151 N. 9TH AVENUE  
PAYNE BLDG, STE 260  
PENSACOLA, FL 32504 US

**New Mailing Address:**

FEI Number: 59-2436597      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MADDEN, PATRICK J  
5151 N. 9TH AVENUE  
ADMINISTRATION  
PENSACOLA, FL 32504 US

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

EMMANUEL, KAREN O  
5151 N. 9TH AVENUE  
ADMINISTRATION  
PENSACOLA, FL 32504 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: KAREN O. EMMANUEL      02/15/2010  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: WEBB, ROGER  
Address: 220 W GARDEN ST STE 500  
City-St-Zip: PENSACOLA, FL 32501

Title: D  
Name: MALOY, BILL  
Address: 5017 HIGH POINT DRIVE  
City-St-Zip: PENSACOLA, FL 32505

Title: S  
Name: MOORE, ELIZABETH B  
Address: 1622 STAR LAKE PLACE  
City-St-Zip: PENSACOLA, FL 32507

Title: C  
Name: ADAMS, BLAISE  
Address: 2200 AIRPORT BOULEVARD  
City-St-Zip: PENSACOLA, FL 32504

Title: P  
Name: ROBERTS, HENRY E  
Address: 5151 NORTH NINTH AVENUE  
City-St-Zip: PENSACOLA, FL 32504

Title: D  
Name: JONES, JIMMY E MD  
Address: 5153 NORTH NINTH AVENUE  
City-St-Zip: PENSACOLA, FL 32504

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: HENRY ROBERTS      P      02/15/2010  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date