

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001680

FILED  
Mar 11, 2010  
Secretary of State

**Entity Name:** THE HULL FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

% CUMMINGS & LOCKWOOD  
3001 TAMIAMI TRAIL NORTH, STE 400  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

% CUMMINGS & LOCKWOOD  
3001 TAMIAMI TRAIL NORTH, STE 400  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 20-2536846

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLASP, INC.  
% CUMMINGS & LOCKWOOD  
3001 TAMIAMI TRAIL NORTH SUITE 400  
NAPLES, FL 34101 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:** DP  
**Name:** HULL, RICHARD  
**Address:** 3001 TAMIAMI TRAIL N., #400  
**City-St-Zip:** NAPLES, FL 34103 US

**Title:** DV  
**Name:** HULL, CHRISTOPHER  
**Address:** 3001 TAMIAMI TRAIL N., #400  
**City-St-Zip:** NAPLES, FL 34103 US

**Title:** DST  
**Name:** SIMONS, WILLIAM N  
**Address:** 3001 TAMIAMI TRAIL N., #400  
**City-St-Zip:** NAPLES, FL 34103 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:** RICHARD HULL

DP

03/11/2010

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

\_\_\_\_\_  
Date