

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001987

FILED  
Apr 14, 2008  
Secretary of State

**Entity Name:** KATHY STILWELL FOUNDATION, INC.

**Current Principal Place of Business:**

2265 LEE ROAD SUITE 201  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

2265 LEE ROAD SUITE 201  
WINTER PARK, FL 32789

**New Mailing Address:**

**FEI Number:** 20-2428528

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HAMRICK, ALEX H  
1000 LEGION PLACE SUITE 1700  
ORLANDO, FL 32801 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: SEAMAN, ROSEMARIE  
Address: 2265 LEE ROAD SUITE 201  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: CANFIELD, SANDY  
Address: 2265 LEE ROAD SUITE 201  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: COLE, JULIE  
Address: 2265 LEE ROAD SUITE 201  
City-St-Zip: WINTER PARK, FL 32789

**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: ROSEMARIE J. SEAMAN

D

04/14/2008

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

\_\_\_\_\_  
Date