

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004266

FILED
Mar 31, 2009
Secretary of State

Entity Name: LITTLE RED WAGON FOUNDATION INC.

Current Principal Place of Business:

4428 GENTRICE DR
VALRICO, FL 33594

New Principal Place of Business:

4428 GENTRICE DR
VALRICO, FL 33596

Current Mailing Address:

4428 GENTRICE DR
VALRICO, FL 33594

New Mailing Address:

4428 GENTRICE DR
VALRICO, FL 33596

FEI Number: 20-2736631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONNER, ZACHARY L
4428 GENTRICE DR
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

BONNER, ZACHARY L
4428 GENTRICE DR
VALRICO, FL 33596 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:

03/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BONNER, LAURIE F
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: BONNER, KELLEY M
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: CHESNEY, STEPHANIE
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: CHESNEY, MATTHEW
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33596

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: BONNER, LAURIE F
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33596

Title: VP (X) Change () Addition
Name: BONNER, KELLEY M
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33596

Title: VP (X) Change () Addition
Name: CHESNEY, STEPHANIE
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33596

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

Title: VP () Change (X) Addition
Name: SMUD, SPENCER
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33596

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: LAURIE BONNER

ED

03/31/2009

Electronic Signature of Signing Officer or Director

Date