

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 06, 2009
Secretary of State**

DOCUMENT# N05000004931

Entity Name: MY BROTHER'S/SISTER'S KEEPER CHARITABLE TRUST, INC.

Current Principal Place of Business:

675 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

675 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: 30-0342153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SANTAMARIA, JESS R
675 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411 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: PD () Delete
Name: SANTAMARIA, JESS R
Address: 675 ROYAL PALM BEACH BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: VPD () Delete
Name: SANTAMARIA, VICTORIA
Address: 675 ROYAL PALM BEACH BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: SD () Delete
Name: CHRISTOPHER, SANTAMARIA
Address: 675 ROYAL PALM BEACH BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411 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: VICTORIA SANTAMARIA

VPD

05/06/2009

Electronic Signature of Signing Officer or Director

Date