

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006218

FILED
May 03, 2010
Secretary of State

Entity Name: THE BORDES-KOHN FOUNDATION, INC.

Current Principal Place of Business:

4427 EMERSON ST
JACKSONVILLE, FL 32207

New Principal Place of Business:

4427 EMERSON ST
2D
JACKSONVILLE, FL 32207

Current Mailing Address:

4427 EMERSON ST
JACKSONVILLE, FL 32207

New Mailing Address:

4427 EMERSON ST
2D
JACKSONVILLE, FL 32207

FEI Number: 37-1511873 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

Name and Address of New Registered Agent:

NWANEGBO, ETHELBEST
1225 W. BEAVER ST
STE 125
JACKSONVILLE, FL 32204 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BORDES-KOHN SR., JOSEPH L
Address: 5260 COLLINS RD #301
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: ST
Name: BORDES-KOHN, OCTAVIA
Address: 5260 COLLINS RD #301
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: VPD
Name: KOHN, DOROTHY
Address: 715 PLAZA DR
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: CD
Name: TURNER, ALETA
Address: 12216 CANEY MARSH CT
City-St-Zip: JACKSONVILLE, FL 32218

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: JOSEPH BORDES-KOHN

DIR

05/03/2010

Electronic Signature of Signing Officer or Director

Date