

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006854

FILED
Feb 11, 2008
Secretary of State

Entity Name: TAYLOR, BEAN FOUNDATION, INC.

Current Principal Place of Business:

101 NE 2ND ST.
OCALA, FL 34470

New Principal Place of Business:

315 NE 14TH ST
OCALA, FL 34470

Current Mailing Address:

101 NE 2ND ST.
OCALA, FL 34470

New Mailing Address:

315 NE 14TH ST
OCALA, FL 34470

FEI Number: 20-3163904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARKAS, LEE B.
101 NE 2ND ST.
OCALA, FL 34470 US

Name and Address of New Registered Agent:

FARKAS, LEE B.
315 NE 14TH ST
OCALA, FL 34470 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: _____

02/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FARKAS, LEE B.
Address: 480 SW 87TH PLACE
City-St-Zip: OCALA, FL 34476

Title: D () Delete
Name: BOWMAN, RAYMOND E.
Address: 4999 SW 2ND CT.
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: MOORE, JASON
Address: 1140 SE KING ST.
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FARKAS, LEE B.
Address: 480 SW 87TH PLACE
City-St-Zip: OCALA, FL 34476

Title: D (X) Change () Addition
Name: BOWMAN, RAYMOND E.
Address: 4999 SW 2ND CT.
City-St-Zip: OCALA, FL 34474

Title: D (X) Change () Addition
Name: MURLA, SEAN A
Address: 480 SW 87TH PLACE
City-St-Zip: OCALA, FL 34476

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: LEE B. FARKAS

LBF

02/11/2008

Electronic Signature of Signing Officer or Director

Date