

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007730

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE NANCY MACKLE STRINGER FOUNDATION, INC.

Current Principal Place of Business:

221 KNOLLWOOD DR
KEY BISCAYNE, FL 33149

New Principal Place of Business:

2695 SW 17TH AVENUE
MIAMI, FL 33133

Current Mailing Address:

221 KNOLLWOOD DR
KEY BISCAYNE, FL 33149

New Mailing Address:

2695 SW 17TH AVENUE
MIAMI, FL 33133

FEI Number: 20-3399161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRINGER, JAMES SR
221 KNOLLWOOD DR
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

STRINGER, JAMES JR
2695 SW 17TH AVENUE
MIAMI, FL 33133 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: JAMES STRINGER JR

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STRINGER, JAMES JR.
Address: 221 KNOLLWOOD DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DV () Delete
Name: STRINGER, JAMES SR.
Address: 221 KNOLLWOOD DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: SD () Delete
Name: STRINGER, CAROLYN M
Address: 1600 S BAYSHORE LN #3C
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: STRINGER, JAMES JR.
Address: 2695 SW 17TH AVENUE
City-St-Zip: MIAMI, FL 33133

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

Title: SD (X) Change () Addition
Name: STRINGER, CAROLYN M
Address: 221 KNOLLWOOD DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

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: JAMES STRINGER SR.

DV

04/30/2008

Electronic Signature of Signing Officer or Director

Date