## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000007951

FILED Jun 01, 2008 Secretary of State

Entity Name: PRINCESS CUTZ FOUNDATION INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
1020 69TH ST CT EAST PALMETTO, FL 34221		2508 55TH AVE WEST BRADENTON, FL 34207 US
Current M	lailing Address:	New Mailing Address:
PO BOX 6 PALMETT	12 O, FL 34220	
n accordan	: 42-1683812 FEI Number Applied For ( ) FEI N ce with s. 607.193(2)(b), F.S., the corporation did not receiv I Address of Current Registered Agent:	Number Not Applicable ( ) Certificate of Status Desired ( ) re the prior notice.  Name and Address of New Registered Agent:
RANDOLPH, SHAUNDA E P 1726 4TH AVE EAST BRADENTON, FL 34208 US		RANDOLPH, SHAUNDA E P 108 56TH AVE DRIVE EAST BRADENTON, FL 34203 US
	named entity submits this statement for the purpose e of Florida.	e of changing its registered office or registered agent, or both
SIGNATUR	RE: SHAUNDA E RANDOLPH	06/01/2008
	Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Fitle: Name: Address: City-St-Zip:	D () Delete ISOM, ORA M 1308 56TH AVE DR EAST BRADENTON, FL 34203	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Fitle: Name: Address: Dity-St-Zip:	D ( ) Delete MITCHELL, DIANE PO BOX 612 PALMETTO, FL 34220	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Fitle: Name: Address: City-St-Zip:	D ( ) Delete ISOM, THOMAS 1308 56TH AVE DR EAST BRADENTON, FL 34203	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Γitle: √ame: √ddress:	D ( ) Delete SHAUNDA RANDOLPH, P,O BOX 612 PALMETTO, FL 34220 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
City-St-Zip:		
City-St-Zip: Fitle: Name: Address: City-St-Zip:	( ) Delete	Title: D ( ) Change (X) Addition Name: POROFILI M JEAN, Address: 2508 55TH AVE WEST City-St-Zip: BRADENTON, FL 34207

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: JEAN M POROFILI D 06/01/2008