

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008686

Entity Name: FPHA FOUNDATION, INC.

FILED
Jan 25, 2009
Secretary of State

Current Principal Place of Business:

1605 PEBBLE BEACH BOULEVARD
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

1605 PEBBLE BEACH BOULEVARD
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: 20-3357151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NULAND, CHRISTOPHER L
1000 RIVERSIDE AVE, STE 115
JACKSONVILLE, FL 32204 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: P () Delete
Name: NAPIER, MIKE
Address: 1605 PEBBIE BEACH BLVD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: PE () Delete
Name: MEYERS, FRANK
Address: 1605 PEBBLE BEACH BOULEVARD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: S () Delete
Name: SALFINGER, YVONNE HALE
Address: 1605 PEBBLE BEACH BOULEVARD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete
Name: WRIGHT, ROBIN
Address: 1605 PEBBLE BEACH BOULEVARD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: ED () Delete
Name: MAGYAR, SANDRA
Address: 1605 PEBBLE BEACH BOULEVARD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEYERS, FRANK
Address: 1605 PEBBIE BEACH BLVD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: PE (X) Change () Addition
Name: HOLT, DOUG
Address: 1605 PEBBLE BEACH BOULEVARD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: S (X) Change () Addition
Name: JORDAHL, LORI
Address: 1605 PEBBLE BEACH BOULEVARD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T (X) Change () Addition
Name: AMRHEIN, DEANNA
Address: 1605 PEBBLE BEACH BOULEVARD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: SANDRA F. MAGYAR

ED

01/25/2009

Electronic Signature of Signing Officer or Director

Date