

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012755

FILED
May 26, 2009
Secretary of State

Entity Name: RAJIA ACKLEY FAMILY FOUNDATION, INC.

Current Principal Place of Business:

22 WEST MONUMENT AVENUE
KISSIMMEE, FL 34741

New Principal Place of Business:

3264 GREENWALD WAY N.
KISSIMMEE, FL 34741

Current Mailing Address:

22 WEST MONUMENT AVENUE
KISSIMMEE, FL 34741

New Mailing Address:

3264 GREENWALD WAY N.
KISSIMMEE, FL 34741

FEI Number: 20-4036559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

LOWMAN, WILLIAM R JR
1000 LEGION PLACE SUITE 1700
ORLANDO, FL 32801 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: D () Delete
Name: ACKLEY, RAJIA N
Address: 22 WEST MONUMENT AVENUE
City-St-Zip: KISSIMMEE, FL 34741

Title: D () Delete
Name: BUSE, DOROTHY
Address: 22 WEST MONUMENT AVENUE SUITE 1
City-St-Zip: KISSIMMEE, FL 34741

Title: D () Delete
Name: WEINBERGER, JULIE
Address: 1005 EMMETT STREET
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BUSE, DOROTHY
Address: 3264 GREENWALD WAY N.
City-St-Zip: KISSIMMEE, FL 34741

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: RAJIA ACKLEY

Electronic Signature of Signing Officer or Director

PRES

05/26/2009

_____ Date