

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003869

FILED
Sep 10, 2007
Secretary of State

Entity Name: FLORIDA TRANSPLANT FOUNDATION, INC.

Current Principal Place of Business:

11656 SUNSHINE POND ROAD
TAMPA, FL 33635 US

New Principal Place of Business:

Current Mailing Address:

11656 SUNSHINE POND ROAD
TAMPA, FL 33635 US

New Mailing Address:

FEI Number: 20-4652329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

MCCARTHY, DEBORAH R
11656 SUNSHINE POND ROAD
TAMPA, FL 33635 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SILVERMAN, ANDREW
Address: 3139 TOSCANA CIRCLE
City-St-Zip: TAMPA, FL 33611 US

Title: VP () Delete
Name: WEAVER, MELANIE
Address: 11656 SUNSHINE POND ROAD
City-St-Zip: TAMPA, FL 33635 US

Title: CFO () Delete
Name: HUDSON, LYNNE
Address: 10429 GREEN HEDGES DRIVE
City-St-Zip: TAMPA, FL 33626 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WEAVER, MELANIE
Address: 602 BREAKWATER TERRACE
City-St-Zip: SEBASTIAN, FL 32958 US

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: MELANIE WEAVER

VP

09/10/2007

Electronic Signature of Signing Officer or Director

Date