

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004812

FILED
Mar 18, 2010
Secretary of State

Entity Name: E. PAT LARKINS CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

1534 NW 4TH AVENUE
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

1534 NW 4TH AVENUE
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: 20-4926487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARKINS, BETTYE L
1534 NW 4TH AVENUE
POMPANO BEACH, FL 33060 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
Name: LARKINS, BETTYE L
Address: 1534 NW 4TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: T
Name: JONES, JAMES L
Address: 1595 NW 7TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: D
Name: POITIER, WOODDROW
Address: 901 NW 4TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: D
Name: GLENN, JIMMIE
Address: 416 NW 9TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: S
Name: JONES, CARMEN
Address: 721 NW 16TH STREET
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: D
Name: PHILLIPS, JESSIE W
Address: 11363 WOODCHUCK DRIVE
City-St-Zip: BOCA RATON, FL 33432 US

I hereby 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 all other like empowered.

SIGNATURE: BETTYE L. LARKINS

P

03/18/2010

Electronic Signature of Signing Officer or Director

Date