

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008798

FILED
Jan 05, 2009
Secretary of State

Entity Name: DOUGLAS G. HALLIDAY FOUNDATION, INC.

Current Principal Place of Business:

5612 CARDER RD., #2C
ORLANDO, FL 32810

New Principal Place of Business:

6401 EDGEWATER DRIVE
ORLANDO, FL 32810

Current Mailing Address:

PO BOX 607010
ORLANDO, FL 32860

New Mailing Address:

6401 EDGEWATER DRIVE
ORLANDO, FL 32810

FEI Number: 33-1142604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARK, CHARLES H
986 DOUGLAS AVE., SUITE 100
ALTAMONTE SPRINGS, FL 32714 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: HALLIDAY, DOUGLAS G
Address: 4050 GOLFSIDE DR
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: HALLIDAY, CHRISTOPHER
Address: 6401 EDGEWATER DR.
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: STARK, CHARLES H
Address: 986 DOUGLAS AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HALLIDAY, CHRISTOPHER M
Address: 6401 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change () Addition
Name: HALLIDAY, CHRISTEN K
Address: 6401 EDGEWATER DR.
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change () Addition
Name: HALLIDAY, HOLLY
Address: 6401 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32810

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: CHRISTOPHER M. HALLIDAY

D

01/05/2009

Electronic Signature of Signing Officer or Director

Date