

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009000

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: ANTHONY LAMAR ANDREWS MEMORIAL FOUNDATION INC

## Current Principal Place of Business:

2 S.W. 7TH AVE  
DANIA, FL 33004

## New Principal Place of Business:

## Current Mailing Address:

2 S.W. 7TH AVE  
DANIA, FL 33004

## New Mailing Address:

FEI Number: 76-0836067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VANHORN, JOYCE A  
3040 CONGRESS PARK DR. APT 414  
LAKE WORTH, FL 33461 US

## Name and Address of New Registered Agent:

VANHORN, JOYCE A  
4632 POINSETTIA LANE  
LAKE WORTH, FL 33461 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:

04/17/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ANDREWS, JACQUELINE M  
Address: 2 S.W. 7TH AVE  
City-St-Zip: DANIA, FL 33004

Title: D ( ) Delete  
Name: ANDREWS, ANDRE  
Address: 2 S.W. 7TH AVE  
City-St-Zip: DANIA, FL 33004

Title: V ( ) Delete  
Name: VANHORN, JOYCE A  
Address: 3040 CONGRESS PK DR. #414  
City-St-Zip: LAKE WORTH, FL 33004

Title: T ( ) Delete  
Name: ANDREWS, DEREK  
Address: 2 S.W. 7TH AVE  
City-St-Zip: DANIA, FL 33004

Title: S ( ) Delete  
Name: JONES, TYISHA  
Address: 2 S.W. 7TH AVE  
City-St-Zip: DANIA, FL 33004

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change ( ) Addition  
Name: VANHORN, JOYCE A  
Address: 4632 POINSETTIA LANE  
City-St-Zip: LAKE WORTH, FL 33004

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

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: JOYCE A.VANHORN

V

04/17/2009

Electronic Signature of Signing Officer or Director

Date