

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009521

FILED
Mar 31, 2009
Secretary of State

Entity Name: FRANCES BANCALE FOUNDATION, INC.

Current Principal Place of Business:

C/O BUTZEL LONG, P.C.
STE 420 1200 N FEDERAL HWY
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

C/O BUTZEL LONG, P.C.
STE 420 1200 N FEDERAL HWY
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 20-8303504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAYMOND, JOHN J JR.
C/O BUTZEL LONG, P.C.
STE 420 1200 N FEDERAL HWY
BOCA RATON, FL 33432 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: DP () Delete
Name: CARRANO, CAROLYN M
Address: 12525 OAK ARBOR LN
City-St-Zip: BOYNTON BCH, FL 33436

Title: DVS () Delete
Name: GSYLE, IZETTA
Address: 300 SAONT MARKS AVE
City-St-Zip: FREEPORT, NY 11520

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CAROLYN M CARRANO

DP

03/31/2009

Electronic Signature of Signing Officer or Director

Date