2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N06000010154

Entity Name: THE JOHNNY DAMON FOUNDATION, INC.

Current Principal Place of Business:

1204 SUNCAST LANE
SUITE 2
EL DORADO HILLS, CA 95762 US

New Principal Place of Business:

Current Mailing Address:

1204 SUNCAST LANE
SUITE 2
EL DORADO HILLS, CA 95762 US

New Mailing Address:

FEI Number: 20-5627102 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALMA, ANTHONY W
390 NORTH ORANGE AVENUE
SUITE 1400
ORLANDO, FL 32801 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:	DAMON, JOHNNY D MR.	
Address:	1204 SUNCAST LANE, SUITE 2	
City-St-Zip:	EL DORADO HILLS, CA 95762 US	
Title:	D	( ) Delete
Name:	MANGAN-DAMON, MICHELLE R MS.	
Address:	1204 SUNCAST LANE, SUITE 2	
City-St-Zip:	EL DORADO HILLS, CA 95762	
Title:	D	( ) Delete
Name:	RINGER, BILL D MR.	
Address:	1401 NORTH HUNTER STREET	
City-St-Zip:	STOCKTON, CA 95202	
Title:	D	( ) Delete
Name:	CZYZEWSKI, ARDEN MR.	
Address:	1204 SUNCAST LANE, SUITE 2	
City-St-Zip:	EL DORADO HILLS, CA 97562	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JOHNNY DAMON D 04/07/2009

Electronic Signature of Signing Officer or Director — Date