2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013086

FILED May 07, 2007 Secretary of State

Entity Name: ROBERT AND SHERRY ROGERS, M.D. FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7631 DESERT INN WAY 3230 CHARLES MACDONALD DR

BRADENTON, FL 34202 SARASOTA, FL 34240

Current Mailing Address: New Mailing Address:

7631 DESERT INN WAY 3230 CHARLES MACDONALD DR

BRADENTON, FL 34202 SARASOTA, FL 34240

FEI Number: 20-8104471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROGERS, ROBERT ROGERS, ROBERT

7631 DESERT INN WAY 3230 CHARLES MACDONALD DR BRADENTON, FL 34202 US SARASOTA, FL 34240 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: ROBERT ROGERS 05/07/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DPS () Delete Title: DPS (X) Change () Addition

Name:ROGERS, ROBERTName:ROGERS, ROBERTAddress:7631 DESERT INN WAYAddress:3230 CHARLES MACDONALD DR

City-St-Zip: BRADENTON, FL 34202 City-St-Zip: SARASOTA, FL 34240

Title: DV () Delete Title: DV (X) Change () Addition Name: ROGERS, SHERRY MD Name: ROGERS, SHERRY MD

Address: 7631 DESERT INN WAY Address: 3230 CHARLES MACDONALD DR

City-St-Zip: BRADENTON, FL 34202 City-St-Zip: SARASOTA, FL 34240

Title: DT () Delete Title: DT (X) Change () Addition Name: BUSCHMAN, ROBERT DT (X) Change () Addition BUSCHMAN, ROBERT

Address: 198 GENESEE STREET Address: 3230 CHARLES MACDONALD DR

City-St-Zip: AUBURN, NY 13021 City-St-Zip: SARASOTA, FL 34240

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: ROBERT ROGERS PRES 05/07/2007

Electronic Signature of Signing Officer or Director

Date