

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
May 18, 2010
Secretary of State**

DOCUMENT# N06626

Entity Name: THE COLEN FOUNDATION, INC**Current Principal Place of Business:**8447 S W 99TH STREET ROAD
OCALA, FL 34481**New Principal Place of Business:****Current Mailing Address:**8447 S W 99TH STREET ROAD
OCALA, FL 34481**New Mailing Address:****FEI Number:** 59-2474711**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COLEN, GERALD R
DEVITO & COLEN
7243 BRYAN DAIRY RD
LARGO, FL 33777 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
Name: COLEN, INA A
Address: 2291 WORLD PKWY BLVD WEST
City-St-Zip: CLEARWATER, FL 33763

Title: DVP
Name: COLEN, KENNETH D
Address: 8447 SW 99TH STREET ROAD
City-St-Zip: OCALA, FL 34481

Title: DST
Name: COLEN, GERALD R ESQ
Address: 7243 BRYAN DAIRY ROAD
City-St-Zip: LARGO, FL 33777

Title: DS
Name: COLEN, LESLEE R
Address: 2291 WORLD PKWY BLVD. W.
City-St-Zip: CLEARWATER, FL 33763

Title: DS
Name: COLEN, ROBERT
Address: 8447 SW 99TH STREET ROAD
City-St-Zip: OCALA, FL 34481

Title: AS
Name: THOMAS, BARBARA
Address: 8447 SW 99TH STREET RD.
City-St-Zip: OCALA, FL 34481

I hereby 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 all other like empowered.

SIGNATURE: BARBARA THOMAS

AS

05/18/2010

Electronic Signature of Signing Officer or Director

Date