

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000486

FILED
Mar 04, 2009
Secretary of State

Entity Name: MICHAEL ROY COSOLA FOUNDATION, INC.

Current Principal Place of Business:

1985 CANTERBURY CIRCLE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

1985 CANTERBURY CIRCLE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COSOLA, RANDI
1985 CANTERBURY CIRCLE
WELLINGTON, FL 33414 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: PT () Delete
Name: COSOLA, RANDI TRUSTEE
Address: 1985 CANTERBURY CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: VS () Delete
Name: COSOLA, RICHARD TRUSTEE
Address: 1985 CANTERBURY CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: TRUS () Delete
Name: COSOLA, DEBRA TRUSTEE
Address: 236 FOXTAIL 1
City-St-Zip: GREENACRES, FL 33415

Title: TRUS () Delete
Name: MAMMANA, DENISE
Address: 2236 SCHNECTRADY AVE
City-St-Zip: NEW YORK, NY 11234

Title: TRUS () Delete
Name: MAMMANA, LORRAINE
Address: 2236 SCHNECTRADY AVE
City-St-Zip: NEW YORK, NY 11234

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:

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: RANDI COSOLA

P

03/04/2009

Electronic Signature of Signing Officer or Director

Date