

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001912

FILED
Mar 25, 2008
Secretary of State

Entity Name: MONTGOMERY FAMILY FOUNDATION, INC.

Current Principal Place of Business:

13400 SUTTON PARK DRIVE SOUTH
SUITE 1402
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

13400 SUTTON PARK DRIVE SOUTH
SUITE 1402
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 20-8623021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRISH, CHRISTINA
13400 SUTTON PARK DRIVE SOUTH
SUITE 1402
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

MONTGOMERY, MITCHELL
13400 SUTTON PARK DRIVE SOUTH
SUITE 1402
JACKSONVILLE, FL 32224 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: MITCHELL R. MONTGOMERY

03/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MONTGOMERY, MITCHELL R
Address: 13400 SUTTON PARK DRIVE SOUTH, SUITE 1402
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: MONTGOMERY, MITCHELL R II
Address: 13400 SUTTON PARK DRIVE SOUTH, SUITE 1402
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: MONTGOMERY, CHRISTEN R
Address: 13400 SUTTON PARK DRIVE SOUTH, SUITE 1402
City-St-Zip: JACKSONVILLE, FL 32224

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:

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: MITCHELL R. MONTGOMERY

D

03/25/2008

Electronic Signature of Signing Officer or Director

Date