

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002423

FILED
Feb 14, 2008
Secretary of State

Entity Name: THE FRICK FOUNDATION, INC.

Current Principal Place of Business:

21 PALM ROAD
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

21 PALM ROAD
STUART, FL 34996

New Mailing Address:

FEI Number: 36-4195649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIACHINO, FERNANDO M
THURLOW & THURLOW PA
17 MARTIN LUTHER KING JR SUITE 200
STUART, FL 34994 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: PD () Delete
Name: FRICK, WILLIAM G
Address: 21 PALM ROAD
City-St-Zip: STUART, FL 34996

Title: STD () Delete
Name: FRICK, KAREN J
Address: 21 PALM ROAD
City-St-Zip: STUART, FL 34996

Title: D () Delete
Name: HUNGERFORD, JACK
Address: 145 MONTGOMERY
City-St-Zip: GLENCOE, IL 60022

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: WILLIAM G FRICK

PD

02/14/2008

Electronic Signature of Signing Officer or Director

Date