

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003994

FILED
Feb 16, 2009
Secretary of State

Entity Name: MAXCESS FOUNDATION, INC.

Current Principal Place of Business:

ONE PARK PLACE SUITE 240
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

ONE PARK PLACE SUITE 240
BOCA RATON, FL 33487

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:

KERNWEIS, GLENN
ONE PARK PLACE SUITE 240
BOCA RATON, FL 33487 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: P () Delete
Name: CAMPO, DAVID
Address: 1301 EIGHTEENTH ST
City-St-Zip: KEY WEST, FL 33040

Title: S () Delete
Name: KERNWEISS, GLENN
Address: ONE PARK PLACE SUITE 240
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: SUTTON, RICHARD B
Address: 3708 WEATHER HILL COVE
City-St-Zip: AUSTIN, TX 78730

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: GLENN KERNWEIS

S

02/16/2009

Electronic Signature of Signing Officer or Director

Date