

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004603

FILED
Jun 27, 2009
Secretary of State

Entity Name: THE JOHNNIE L. PHILLIPS FOUNDATION, INC.

Current Principal Place of Business:

3824 HEATH CIRCLE SOUTH
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

PO BOX 222204
WEST PALM BEACH, FL 33422

New Mailing Address:

FEI Number: 20-8958018 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PHILLIPS, TANGELA N
4604 TOWER PINE ROAD
ORLANDO, FL 32839 US

Name and Address of New Registered Agent:

PHILLIPS, TANGELA N
3824 HEATH CIRCLE SOUTH
WEST PALM BEACH, FL 33407 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: _____

06/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PHILLIPS, TANGELA N
Address: PO BOX 222204
City-St-Zip: WEST PALM BEACH, FL 33422

Title: D () Delete
Name: PHILLIPS TAYLOR, LASHANTA
Address: PO BOX 222204
City-St-Zip: WEST PALM BEACH, FL 33422

Title: D () Delete
Name: BOWERS, KEN
Address: PO BOX 222204
City-St-Zip: WEST PALM BEACH, FL 33422

Title: D () Delete
Name: PHILLIPS, LINDA J
Address: PO BOX 222204
City-St-Zip: WEST PALM BEACH, FL 33422

Title: D () Delete
Name: BROWN, ERNEST
Address: PO BOX 222204
City-St-Zip: WEST PALM BEACH, FL 33422

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: LASHANTA PHILLIPS TAYLOR

D

06/27/2009

Electronic Signature of Signing Officer or Director

Date