2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# N07000005075

Entity Name: BOB & STACY SCHMETTERER FOUNDATION, INC.

Current Principal Place of Business:

11 MARINA VILLAGE
UNIT B
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

24 DOCKSIDE LANE
PMB 398
KEY LARGO, FL 33037 US

New Mailing Address:

FEI Number: 26-0335499 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LYNN, SANDRA T
830 NORTH KROME AVENUE
HOMESTEAD, FL 33030 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: DPT ( ) Delete
Name: SCHMETTERER, ROBERT A
Address: 24 DOCKSIDE LANE, PMB 398
City-St-Zip: KEY LARGO, FL 33037 US

Title: DVPS ( ) Delete
Name: SCHMETTERER, STACY
Address: 24 DOCKSIDE LANE, PMB 398
City-St-Zip: KEY LARGO, FL 33037 US

Title: D ( ) Delete
Name: FABIANO, LISA
Address: 67 SUNSET HILL ROAD
City-St-Zip: REDDING, CT 06896 US

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: ROBERT A. SCHMETTERER DPT 01/15/2009

Electronic Signature of Signing Officer or Director — Date