

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005403

FILED
Apr 30, 2009
Secretary of State

Entity Name: FREEDOM FORMULA FOUNDATION, INC.

Current Principal Place of Business:

7777 N WICKHAM RD STE 12-118
MELBOURNE, FL 32940

New Principal Place of Business:

7777 N WICKHAM RD
STE 12-118
MELBOURNE, FL 32940

Current Mailing Address:

7777 N WICKHAM RD STE 12-118
MELBOURNE, FL 32940

New Mailing Address:

7777 N WICKHAM RD
STE 12-118
MELBOURNE, FL 32940

FEI Number: 26-0687939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINES, SUSAN COD
7777 N WICKHAM RD
SUITE 12-118
MELBOURNE, FL 32940 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: COD () Delete
Name: HAINES, SUSAN
Address: 7777 N WICKHAM RD STE 12-118
City-St-Zip: MELBOURNE, FL 32940

Title: COD () Delete
Name: HAINES, MARK
Address: 7777 N WICKHAM RD STE 12-118
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SUSAN HAINES

COD

04/30/2009

Electronic Signature of Signing Officer or Director

Date