

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000005517

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** NICOLETTE BROOKE IBLER FOUNDATION, INC.

**Current Principal Place of Business:**

6180 SW 112 ST.  
PINECREST, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

6180 SW 112 ST.  
PINECREST, FL 33156

**New Mailing Address:**

**FEI Number:** 26-0308241

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

IBLER, THERESA  
6180 SW 112 ST.  
PINECREST, FL 33156 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:** DC  
**Name:** IBLER, THERESA  
**Address:** 6180 SW 112 ST.  
**City-St-Zip:** PINECREST, FL 33156

**Title:** DT  
**Name:** IBLER, GEROLD  
**Address:** 6180 SW 112 ST.  
**City-St-Zip:** PINECREST, FL 33156

I hereby 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 all other like empowered.

**SIGNATURE:** THERESA IBLER

D

01/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date