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Secretary of State
03-20-2008 90028 008 ****70.00

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

66006378

DOCUMENT # N07000005545

1. Entity Name
THE MICHAEL BUONAURO FOUNDATION, INC.

Principal Place of Business	Mailing Address
24 PINE ST. WINDERMERE, FL 34786	24 PINE ST. WINDERMERE, FL 34786

01172008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 26-0279763 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHAMS, MAURICE ESQ.
111 N ORANGE AVENUE
SUITE 1200
ORLANO, FL 32801

7. Name and Address of New Registered Agent

Name FRANK A BUONAURO JR
Street Address (P.O. Box Number is Not Acceptable) 24 PINE ST
City WINDERMERE, FL. 34786
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE FRANK A BUONAURO JR Frank A Buonauro Jr 3-7-08
Signature, type or printed name of registered agent and title if applicable PRES. (NOTE: Registered agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUONAURO, JUDITH V P.O. BOX 1369 WINDERMERE, FL 34786	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUONAURO, FRANK A JR P.O. BOX 1369 WINDERMERE, FL 34786	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEINGARTE, FELICA C 9224 GUADALUPE TRAIL NW ALBUQUERQUE, NM 87114	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	WEINGARTNER, FELICIA (spelled wrong)	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank A Buonauro Jr Pres. 4-9-08 407-876-3595
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #