2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N07000006963

Entity Name: CORNERSTONE INTERNATIONAL FOUNDATION, INC.

Current Principal Place of Business:

4205 EDGEWATER DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

4205 EDGEWATER DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 26-0633379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STONE, MARK A
31 INTERLAKE ROAD
ORLANDO, FL 32804 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 ( ) Delete
Name: STONE, MARK A
Address: 31 INTERLAKEN ROAD
City-St-Zip: ORLANDO, FL 32804

Title: DST ( ) Delete
Name: STONE, AMADITA
Address: 31 INTERLAKEN ROAD
City-St-Zip: ORLANDO, FL 32804

Title: DVC ( ) Delete
Name: GONDER, JASON
Address: 14409 AINSDALE CT
City-St-Zip: ORLANDO, FL 32828

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DTRE (X) Change ( ) Addition
Name: STONE, AMADITA
Address: 31 INTERLAKEN ROAD
City-St-Zip: ORLANDO, FL 32804

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DSEC ( ) Change (X) Addition
Name: ROHM, KALEINA
Address: 285 UPTOWN BLVD # 208
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D ( ) Change (X) Addition
Name: WIECZORECK, LISA
Address: 5329 EEGELESTON AVE
City-St-Zip: ORLANDO, FL 32810

Title: D ( ) Change (X) Addition
Name: SAWCHUK, KEVIN
Address: 1020 ALFRED DRIVE
City-St-Zip: ORLANDO, FL 32810

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: MARK A STONE DC 03/20/2009
Electronic Signature of Signing Officer or Director — Date