

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007719

FILED
Mar 09, 2008
Secretary of State

Entity Name: SAYLOR FOUNDATION INC

Current Principal Place of Business:

900 COVE CAY
2H
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

900 COVE CAY
2H
CLEARWATER, FL 33760 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAYLOR, JAMES C
900 COVE CAY
2H
CLEARWATER, FL 33760 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: DCEO () Delete
Name: MCMANUS, BETSEY
Address: P.O. BOX 2464
City-St-Zip: LAKELAND, FL 33806 US

Title: DVP () Delete
Name: SAYLOR, JAIME B
Address: 6995 FORD STATION ROAD
City-St-Zip: GERMANTOWN, TN 38138 US

Title: D () Delete
Name: SAYLOR, JAMES C
Address: 900 COVE CAY 2H
City-St-Zip: CLEARWATER, FL 33760 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: JAMES C. SAYLOR

D

03/09/2008

Electronic Signature of Signing Officer or Director

Date