

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008645

FILED
Mar 27, 2009
Secretary of State

Entity Name: THE LOYAL FOUNDATION INC.

Current Principal Place of Business:

634 OAKVIEW STREET
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

2790 GRASSMOOR LOOP
APOPKA, FL 32712

Current Mailing Address:

634 OAKVIEW STREET
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

2790 GRASSMOOR LOOP
APOPKA, FL 32712

FEI Number: 26-0880340

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEROGATIS, ANTHONY SR
634 OAKVIEW STREET
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

DEROGATIS, ANTHONY SR
2790 GRASSMOOR LOOP
APOPKA, FL 32712 US

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:

03/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: DEROGATIS, ANTHONY
Address: 634 OAKVIEW STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DT () Delete
Name: WORKMAN, JUDY
Address: 634 OAKVIEW STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DS () Delete
Name: HADLEY, TAMMY
Address: 634 OAKVIEW STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: DEROGATIS, ANTHONY
Address: 2790 GRASSMOOR LOOP
City-St-Zip: APOPKA, FL 32712

Title: DT (X) Change () Addition
Name: WORKMAN, JUDY
Address: 2790 GRASSMOOR LOOP
City-St-Zip: APOPKA, FL 32712

Title: DS (X) Change () Addition
Name: HADLEY, TAMMY
Address: 2790 GRASSMOOR LOOP
City-St-Zip: APOPKA, FL 32712

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: ANTHONY DEROGATIS SR

DPT

03/27/2009

Electronic Signature of Signing Officer or Director

Date