

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 10, 2008
Secretary of State**

DOCUMENT# N07000008816

Entity Name: BARBARA WHITE FOUNDATION, INC.

Current Principal Place of Business:

450 N.E. 142ND STREET
NORTH MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

450 N.E. 142ND STREET
NORTH MIAMI, FL 33161 US

New Mailing Address:

P.O. BOX 012404
MIAMI, FL 33101 US

FEI Number: 26-0903253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, SEREDA
450 N.E. 142ND STREET
NORTH MIAMI, FL 33161 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: P () Delete
Name: WHITE, SEREDA
Address: 450 N.E. 142ND STREET
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: VP () Delete
Name: WHITE, JANAY A
Address: 450 N.E. 142ND STREET
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: SEC () Delete
Name: WHITE, SEREDA
Address: 450 N.E. 142ND STREET
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: TREA () Delete
Name: WHITE, SEREDA
Address: 450 N.E. 142ND STREET
City-St-Zip: NORTH MIAMI, FL 33161

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:

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: SEREDA WHITE

PRES

02/10/2008

Electronic Signature of Signing Officer or Director

Date