

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009159

FILED
Jul 07, 2008
Secretary of State

Entity Name: THE INSETTA FAMILY FOUNDATION, INC.

Current Principal Place of Business:

8444 DARNELL PLACE
JACKSONVILLE, FL 32217

New Principal Place of Business:

8444 DARNALL PLACE
JACKSONVILLE, FL 32217

Current Mailing Address:

8444 DARNELL PLACE
JACKSONVILLE, FL 32217

New Mailing Address:

8444 DARNALL PLACE
JACKSONVILLE, FL 32217

FEI Number: 26-1093740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

INSETTA, VICTOR
8444 DARNELL PLACE
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

INSETTA, VICTOR
8444 DARNALL PLACE
JACKSONVILLE, FL 32217 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: _____

07/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: INSETTA, VICTOR
Address: 8444 DARNELL PLACE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: INSETTA, DIANE
Address: 8444 DARNELL PLACE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: KELLY, KATHY
Address: 60 RUTH ST.
City-St-Zip: SMITHTOWN, NY 11787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: INSETTA, VICTOR
Address: 8444 DARNALL PLACE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change () Addition
Name: INSETTA, DIANE
Address: 8444 DARNALL PLACE
City-St-Zip: JACKSONVILLE, FL 32217

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: VICTOR INSETTA

D

07/07/2008

Electronic Signature of Signing Officer or Director

Date