## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000009214

FILED Jun 24, 2008 Secretary of State

Entity Name: SAM AND ZERA SMITH FOUNDATION INC.

Current Principal Place of Business: New Principal Place of Business:

1409 CONNECTICUT ST TALLAHASSEE, FL 32304

Current Mailing Address: New Mailing Address:

1409 CONNECTICUT ST TALLAHASSEE, FL 32304

FEI Number: 87-6284896 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

BENNETT, ZOE ALLEN SMITH, GLORIA J

1225 CENTRAL ST 1409 CONNECTICUT ST TALLAHASSEE, FL 32303 US TALLAHASSEE, FL 32304 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: GLORIA JEAN SMITH 06/24/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 SMITH, GLORIA JEAN
 Name:
 BENNETT, ZOE

 Address:
 1409 CONNECTICUT ST
 Address:
 1225 CENTRAL ST

 City-St-Zip:
 TALLAHASSEE, FL 32304
 City-St-Zip:
 TALLAHASSEE, FL 32303

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SPEIGHTS, SHEA
 Name:

 Address:
 1409 CONNECTICUT ST
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32304
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BENNETT, ZOE ALLEN
 Name:

 Address:
 1225 CENTRAL ST
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32303
 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: ZOE ALLEN BENNETT DIR 06/24/2008