2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010105

Entity Name: C. WILKIE MELTON FOUNDATION, INC.

FILED Apr 18, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
4250 PINEWOO MELBOURNE, F							
Current Mailing Address:				New Mailing Address:			
4250 PINEWOO MELBOURNE, F							
FEI Number: 26-13	30046	FEI Number Applied For ()	FEI Nun	nber Not App	clicable () Certificate of Status Desired	(X)	
Name and Addr	ress of Cı	ırrent Registered Agent:		Name and	Address of New Registered Agent:		
BOYD, JOEL E 360 NORTH BAE MELBOURNE, F		TREET, SUITE 104 US					
The above name in the State of Flo		ubmits this statement for the p	urpose o	of changing i	its registered office or registered agent, or	r both,	
SIGNATURE: _							
	Electroni	Signature of Registered Age	:nt		Date		
OFFICERS AND	DIRECT	ORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRE	ECTOR	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	PRES () Change (X) Addition TOLLEY, WILLIAM R 4250 PINEWOOD ROAD MELBOURNE, FL 32934		
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition HOLMAN NASH, DEVETTA 402 SOUTHSHORE PARKWAY DURHAM, NC 27703		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	TREA () Change (X) Addition SHEALY, ROGER 1724 SMITH DRIVE TITISVILLE, FL 32780		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition LEES, DON 47 MARINA ISLES BLVD. INDIAN HARBOUR BEACH, FL 32937		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition MELTON, CHARLES JR 8076 BUTTONWOOD CIRCLE TAMARAC, FL 32321		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition SALVAGIO, DENNIS 1600 EAST ROBINSON STREET, STE 300 ORLANDO, FL 32803		

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: WILLIAM R. TOLLEY PRES 04/18/2008