

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010105

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: C. WILKIE MELTON FOUNDATION, INC.

## Current Principal Place of Business:

4250 PINEWOOD ROAD  
MELBOURNE, FL 32934

## New Principal Place of Business:

## Current Mailing Address:

4250 PINEWOOD ROAD  
MELBOURNE, FL 32934

## New Mailing Address:

FEI Number: 26-1330046

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOYD, JOEL E  
360 NORTH BABCOCK STREET, SUITE 104  
MELBOURNE, FL 32935 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: PRES ( ) Delete  
Name: TOLLEY, WILLIAM R  
Address: 4250 PINEWOOD ROAD  
City-St-Zip: MELBOURNE, FL 32934

Title: SEC ( ) Delete  
Name: HOLMAN NASH, DEVETTA  
Address: 402 SOUTHSORE PARKWAY  
City-St-Zip: DURHAM, NC 27703

Title: TREA ( ) Delete  
Name: SHEALY, ROGER  
Address: 1724 SMITH DRIVE  
City-St-Zip: TITISVILLE, FL 32780

Title: DIR ( ) Delete  
Name: LEES, DON  
Address: 47 MARINA ISLES BLVD.  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: DIR ( ) Delete  
Name: MELTON, CHARLES JR  
Address: 8076 BUTTWOOD CIRCLE  
City-St-Zip: TAMARAC, FL 32321

Title: DIR ( ) Delete  
Name: SALVAGIO, DENNIS  
Address: 1600 EAST ROBINSON STREET, STE 300  
City-St-Zip: ORLANDO, FL 32803

## 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:

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: WILLIAM R TOLLEY

MR

04/06/2009

Electronic Signature of Signing Officer or Director

Date