

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011253

FILED
Apr 30, 2008
Secretary of State

Entity Name: WILLIAM RYAN FOUNDATION, INC.

Current Principal Place of Business:

4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541

New Principal Place of Business:

11 21ST STREET
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

11 21ST STREET
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 26-1444770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLKMAN, JASON D ESQUIRE
4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

VOLKMAN, JASON D ESQUIRE
213 BRITTANY LANE
CRESTVIEW, FL 32536 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:

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SCANNELL, ERIKA
Address: 11 21ST STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCANNELL, ERIKA
Address: 11 21ST STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: VPD () Change (X) Addition
Name: SCANNELL, JR, JOHN L
Address: 11 21ST STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: SD () Change (X) Addition
Name: MCINTOSH, DANA
Address: 69 HIDDEN LAKES DRIVE
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: TD () Change (X) Addition
Name: OLSON, SANDY
Address: 168 TRADEWINDS DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: D () Change (X) Addition
Name: VOLKMAN, JASON D
Address: 213 BRITTANY LANE
City-St-Zip: CRESTVIEW, FL 32536 US

Title: D () Change (X) Addition
Name: VOLKMAN, CAROLYNNE
Address: 213 BRITTANY LANE
City-St-Zip: CRESTVIEW, FL 32536 US

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: JASON D VOLKMAN

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date