

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011726

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: JOHN AND MARTHA ODLE FAMILY FOUNDATION, INC.

## Current Principal Place of Business:

6060 PINNACLE LANE NO 1903  
NAPLES, FL 34110

## New Principal Place of Business:

6060 PINNACLE LANE  
#1903  
NAPLES, FL 34110

## Current Mailing Address:

6060 PINNACLE LANE NO 1903  
NAPLES, FL 34110

## New Mailing Address:

6060 PINNACLE LANE  
#1903  
NAPLES, FL 34110

FEI Number: 26-1561774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ODLE, JOHN H  
6060 PINNACLE LANE NO 1903  
NAPLES, FL 34110 US

## Name and Address of New Registered Agent:

ODLE, JOHN H PD  
6060 PINNACLE LANE  
# 1903  
NAPLES, FL 34110 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: JOHN H. ODLE

04/21/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: ODLE, JOHN  
Address: 6060 PNNACLE LANE #1903  
City-St-Zip: NAPLES, FL 34110

Title: DVPS ( ) Delete  
Name: MARTHA, ODLE  
Address: 6060 PNNACLE LANE #1903  
City-St-Zip: WINNETKA, IL 60093

Title: D ( ) Delete  
Name: ODLE, KEVIN  
Address: 1496 SCOTT AVE  
City-St-Zip: WINNETKA, IL 60093

Title: D ( ) Delete  
Name: GREGORY, ODLE  
Address: 45 TESSIER BLVD EAST  
City-St-Zip: INDIANAPOLIS, IN 46220

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ODLE, JOHN H  
Address: 6060 PINNACLE LANE #1903  
City-St-Zip: NAPLES, FL 34110 US

Title: DVPS (X) Change ( ) Addition  
Name: MARTHA, ODLE S  
Address: 6060 PINNACLE LANE #1903  
City-St-Zip: NAPLES, FL 34110 US

Title: D (X) Change ( ) Addition  
Name: ODLE, KEVIN D  
Address: 777 LOCUST  
City-St-Zip: WINNETKA, IL 60093 US

Title: D (X) Change ( ) Addition  
Name: GREGORY, ODLE A  
Address: 45 KESSLER BLVD EAST  
City-St-Zip: INDIANAPOLIS, IN 46220 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: JOHN H. ODLE

P/D

04/21/2009

Electronic Signature of Signing Officer or Director

Date