## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07096

FILED Feb 25, 2008 Secretary of State

Entity Name: SICKLE CELL FOUNDATION, UPPER PINELLAS AND PASCOCOUNTY, INC. **Current Principal Place of Business: New Principal Place of Business:** 401 E MARTIN LUTHER KING JR DR TARPON SPRINGS, FL 34688 **Current Mailing Address: New Mailing Address:** P.O. BOX 6312 CLEARWATER, FL 33758 FEI Number: 59-3219223 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HATTIE, BATTLE M P 620 11TH PLACE NO. SAFETY HARBOR, FL 34695 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BATTLE, HATTIE M P Name: Name: Address: 620 11TH PLACE NORTH Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LA PREAD, JESSIE VP Name: Address: 2165 NO. CATALINA DR. Address: City-St-Zip: CLEARWATER, FL 33765 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: HATTIE M. BATTLE PRES 02/25/2008