

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004203

FILED  
Jan 11, 2011  
Secretary of State

Entity Name: VENOM FOUNDATION INC.

**Current Principal Place of Business:**

926 W. THARPE ST  
SUITE 3  
TALLAHASSEE, FL 32303 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 38042  
TALLAHASSEE, FL 32315 US

**New Mailing Address:**

FEI Number: 27-2247978

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOWERY, JERRELL  
3110 OKEEHEEPKEE RD  
TALLAHASSEE, FL 32303 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: P/D  
Name: LOWERY, JERRELL  
Address: 3110 OKEEHEEPKEE RD  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VP  
Name: WHITEHURST, ANTHONY  
Address: 5628 SIOUX DR  
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: SEC  
Name: BOOTHE-THOMPSON, JUANITA  
Address: 1126 RICHARDSON RD  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: TRES  
Name: MORGAN-GATES, VICKIE L  
Address: 2422 ROSEMARY TERRACE  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: M  
Name: MONGERIE, LENIN  
Address: 4093 REEMER CT  
City-St-Zip: TALLAHASSEE, FL 32303

Title: M  
Name: HOOD, ZANE G  
Address: 285 WATER OAK DR  
City-St-Zip: TALLAHASSEE, FL 32305

I hereby 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 all other like empowered.

SIGNATURE: JERRELL LOWERY

P/D

01/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date