

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 21, 2009  
Secretary of State**

DOCUMENT# N08000004773

Entity Name: FLORIDA VOTERS FOUNDATION, INC.

**Current Principal Place of Business:**

6200 SW 63RD COURT  
SOUTH MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

6200 SW 63RD COURT  
SOUTH MIAMI, FL 33143

**New Mailing Address:**

FEI Number: 26-3542428      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JACOBS, DAVID  
6401 SW 87TH AVENUE  
SUITE 204  
MIAMI, FL 33173 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: PD ( ) Delete  
Name: MCCREA, DAN  
Address: 6200 SW 63RD COURT  
City-St-Zip: SOUTH MIAMI, FL 33143

Title: VD ( ) Delete  
Name: HAENGEL, PAM  
Address: 6200 SW 63RD COURT  
City-St-Zip: SOUTH MIAMI, FL 33143

Title: TD ( ) Delete  
Name: JACOBS, DAVID  
Address: 6401 SW 87TH AVENUE #204  
City-St-Zip: MIAMI, FL 33173

Title: SD ( ) Delete  
Name: FLETCHER, LISA  
Address: 6200 SW 63RD COURT  
City-St-Zip: SOUTH MIAMI, FL 33143

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

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

**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: D ( ) Change (X) Addition  
Name: LINDA, KAPLAN  
Address: 6200 SW 63RD COURT  
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D ( ) Change (X) Addition  
Name: LARRY, SHERRY  
Address: 6200 SW 63RD COURT  
City-St-Zip: SOUTH MIAMI, FL 33143

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: DAN MCCREA

PD

02/21/2009

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

\_\_\_\_\_  
Date