

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005348

FILED
Mar 07, 2011
Secretary of State

Entity Name: SNODGRASS FAMILY FOUNDATION, INC.

Current Principal Place of Business:

1301 RIVERPLACE BOULEVARD
SUITE 1500
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 840072
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 26-2741601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURLEY, CHARLES R JR.
1301 RIVERPLACE BOULEVARD
SUITE 1500
JACKSONVILLE, FL 32207 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: PRES
Name: SNODGRASS, GARY
Address: 712 OCEAN PALM WAY
City-St-Zip: ST AUGUSTINE, FL 32080

Title: SECY
Name: SNODGRASS, PATSY T
Address: 712 OCEAN PALM WAY
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VP
Name: SNODGRASS, PATRICK
Address: 258 FIDDLERS POINT DRIVE
City-St-Zip: ST AUGUSTINE, FL 32080

Title: TREA
Name: SNODGRASS, AMY B
Address: 258 FIDDLERS POINT DRIVE
City-St-Zip: ST AUGUSTINE, FL 32080

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: S GARY SNODGRASS

PRES

03/07/2011

Electronic Signature of Signing Officer or Director

Date