

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005832

FILED
May 01, 2011
Secretary of State

Entity Name: VOIGHT FOUNDATION, INC.

Current Principal Place of Business:

9413 STATE ROAD 535
ORLANDO, FL 32836 US

New Principal Place of Business:

Current Mailing Address:

C/O HARDRICK ENTERPRISES CORPORATION
P O BOX 561333
ORLANDO, FL 328561333 US

New Mailing Address:

FEI Number: 26-2801341 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARDRICK ENTERPRISES CORPORATION
918 WOODEN BOULEVARD
ORLANDO, FL 328053467 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: CCEO
Name: DAVID, HARDRICK J
Address: 918 WOODEN BOULEVARD
City-St-Zip: ORLANDO, FL 32805 US

Title: VCOO
Name: LODGE, MICHAEL
Address: 2700 WESTHALL LANE SUITE 135
City-St-Zip: MAITLAND, FL 32751 US

Title: SCOS
Name: ANDREWS, GEOFFRY
Address: 2700 WESTHALL LANE SUITE 135
City-St-Zip: MAITLAND, FL 32751 US

Title: F
Name: VOIGHT, WILLIAM C II
Address: 9413 STATE ROAD 535
City-St-Zip: ORLANDO, FL 32836 US

Title: D
Name: HARDRICK, VINELL M
Address: 918 WOODEN BOULEVARD
City-St-Zip: ORLANDO, FL 32805 US

Title: TCFO
Name: MAI, AMY T
Address: 2700 WESTHALL LANE SUITE 135
City-St-Zip: MAITLAND, FL 32751 US

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: DAVID HARDRICK

C

05/01/2011

Electronic Signature of Signing Officer or Director

_____ Date