

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007563

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: THE DARCY J. FOUNDATION, INC.

## Current Principal Place of Business:

721 STERLING SPRING ROAD  
ORLANDO, FL 32828

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 781565  
ORLANDO, FL 328781565

## New Mailing Address:

FEI Number: 26-3104247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JOHNSON, CARISSA R  
721 STERLING SPRING ROAD  
ORLANDO, FL 32828 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 ( ) Delete  
Name: JOHNSON, DARCY S  
Address: 721 STERLING SPRING ROAD  
City-St-Zip: ORLANDO, FL 32828

Title: VP ( ) Delete  
Name: JOHNSON, CARISSA R  
Address: 721 STERLING SPRING ROAD  
City-St-Zip: ORLANDO, FL 32828

Title: DIR. ( ) Delete  
Name: JOSEPH, T'RONDA  
Address: 6132 MILLSTONE RUN  
City-St-Zip: STONE MOUNTAIN, GA 30087

Title: DIR. ( ) Delete  
Name: CAMERON, WILLIE J  
Address: 1915 NW 5TH WAY  
City-St-Zip: POMPANO BEACH, FL 33060

Title: DIR. ( ) Delete  
Name: STYLES, GWENDOLYN M  
Address: 1203 NORTH 17TH STREET  
City-St-Zip: PALATKA, FL 32177

## 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: ( ) Change ( ) Addition  
Name:  
Address:  
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: CARISSA JOHNSON

VP

03/23/2009

Electronic Signature of Signing Officer or Director

Date