2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007759

Entity Name: MICRO GIVING FOUNDATION, INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

639 EAST OCEAN AVE. 4020 THOR DRIVE

SUITE 302 BOYNTON BEACH, FL 33426

BOYNTON BEACH, FL 33435

Current Mailing Address: New Mailing Address:

P.O BOX 1567

STONY BROOK, NY 11790

FEI Number: 26-4779155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FERBER, JOHN 639 EAST OCEAN AVE. SUITE 302 BOYNTON BEACH, FL 33435 US

OFFICERS AND DIRECTORS:

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

Electronic Signature of Registered Ag

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 FERBER, JOHN
 Name:

 Address:
 4020 THOR DRIVE, SUITE 200
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33426
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name: ELLEN, JASON Name: ELLIN, JASON

Address: 203 CHRISTIAN AVENUE Address: 203 CHRISTIAN AVENUE City-St-Zip: STONY BROOK, NY 11790 City-St-Zip: STONY BROOK, NY 11790

Title: D () Delete Title: () Change () Addition

 Name:
 FRAEDRICK, MICHELLE
 Name:

 Address:
 1214 GEORGE BUSH BLVD.
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33435
 City-St-Zip:

 $\label{eq:time_def} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 LAZARUS, WAYNE
 Name:

 Address:
 80 PEACHTREE PARK DRIVE NE
 Address:

 City-St-Zip:
 ATLANTA, GA 30309
 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: JOHN FERBER D 04/30/2009