2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008444

FILED Feb 08, 2009 Secretary of State

Entity Name: GERALD M. AND SANDRA W. LOEVNER FAMILY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4077 FLAMINGO AVENUE SARASOTA, FL 34242 **Current Mailing Address: New Mailing Address:** 4077 FLAMINGO AVENUE SARASOTA, FL 34242 FEI Number: 26-3338778 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: SCHEMBRI, JENIFER S BAND, GREG ESQ. 240 S PINEÁPPLE AVE 10TH FLOOR ONE SOUTH SCHOOL AVE. SARASOTA, FL 34236 SUITE 500 SARASOTA, FL 34237 US 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: GREG BAND 02/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LOEVNER, SANDRA W Name: Name: 4077 FLAMINGO AVENUE Address: Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip: Title: () Delete Title: () Change () Addition OLSON, SHANNON K Name: Name: Address: 8446 CYPRESS HOLLOW DR Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: Title: () Delete Title: (X) Change () Addition BAND, DAVID S Name: BAND, DAVID S Name: 4100 FLAMINGO AVENUE Address: 4077 FLAMINGO AVENUE Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip: SARASOTA, FL 34242 Title: (X) Delete Title: () Change () Addition Name: SCHEMBRI, JENIFER S Name: 4077 FLAMINGO AVENUE Address: Address: City-St-Zip: SARASOTA, FL 34242 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: SANDRA W. LOEVNER DP 02/08/2009