

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008565

FILED
Apr 14, 2009
Secretary of State

Entity Name: FLORIDA LACROSSE FOUNDATION, INC.

Current Principal Place of Business:

1306 TOWN PLAZA COURT
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 195383
WINTER SPRINGS, FL 32719

New Mailing Address:

FEI Number: 26-3649283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPROW & STRATTON, PL
1318 TOWN PLAZA COURT
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

KAPROW & STRATTON, P.L.
1318 TOWN PLAZA COURT
WINTER SPRINGS, FL 32708 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: MICHAEL STRATTON

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FISHER, DEBRA
Address: 138 SEVILLE CASE DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: KENT, PHYLLIS S
Address: 869 LEOPARD TRAIL
City-St-Zip: WINTER SPRINGS, FL 21709

Title: D () Delete
Name: STRATTON, MICHAEL
Address: 1318 TOWN PLAZA COURT
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FISHER, DEBRA
Address: 138 SEVILLE CHASE DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

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: MICHAEL STRATTON

D

04/14/2009

Electronic Signature of Signing Officer or Director

Date