

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009604

FILED
Apr 19, 2011
Secretary of State

Entity Name: CALVIN H. REED FAMILY FOUNDATION, INC.

Current Principal Place of Business:

201 N FRANKLIN STREET STE 2000
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

201 N FRANKLIN STREET STE 2000
TAMPA, FL 33602

New Mailing Address:

FEI Number: 26-3668924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANNIS, NATALIE C
201 N FRANKLIN STREET STE 2000
TAMPA, FL 33602 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: PD
Name: REED, CALVIN H
Address: 201 NORTH FRANKLIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

Title: VPST
Name: REED, DAVID HAMILTON
Address: 201 NORTH FRANKLIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

Title: D
Name: REED, DAVID HAMILTON
Address: 201 NORTH FRANKLIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

Title: D
Name: REED, CHRISTOPHER
Address: 201 NORTH FRANKLIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

Title: D
Name: REED, KATHERINE CHAS
Address: 201 NORTH FRANKLIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

Title: D
Name: REED, WENDY
Address: 201 NORTH FRANKLIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

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: CALVIN H. REED

PD

04/19/2011

Electronic Signature of Signing Officer or Director

Date