2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2009
Secretary of State

DOCUMENT# N08000010236

Entity Name: TYLER MCLELLAN FOUNDATION, INC.

Current Principal Place of Business:

11647 TURNSTONE DRIVE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

11647 TURNSTONE DRIVE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 26-3670938 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCLELLAN, KARIN L
11647 TURNSTONE DRIVE
WELLINGTON, FL 33414 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: MCLELLAN, KEVIN
Address: 11647 TURNSTONE DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: VPT ( ) Delete
Name: MCLELLAN, KARIN L
Address: 11647 TURNSTONE DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete
Name: FICKLEY, MARJORIE
Address: 60 SEMINOLE CT WEST
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: MCLELLAN, JOHN
Address: 117 JEANNE ST
City-St-Zip: BELLINGHAM, MA 02019

Title: D ( ) Delete
Name: DELANEY, KATHY
Address: 109 PLYMPTON ST
City-St-Zip: WALTHAM, MA 02451

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: KARIN L MCLELLAN VP 03/21/2009

Electronic Signature of Signing Officer or Director — Date