

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010474

FILED  
Jul 14, 2009  
Secretary of State

**Entity Name:** THE CURTIS J. PHILLIPS MEMORIAL FOUNDATION CORPORATION

**Current Principal Place of Business:**

1141 VIA JARDIN  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

1141 VIA JARDIN  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SOSA, JOSE D ESQ  
5850 CORAL RIDGE DRIVE, SUITE 201  
CORAL SPRINGS, FL 33076 US

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

SOSA, JOSE D ESQ  
1141 VIA JARDIN  
PALM BEACH GARDENS, FL 33418 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: JOSE D. SOSA

07/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DVCS ( ) Delete  
Name: SOSA, JOSE D  
Address: 1141 VIA JARDIN  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T ( ) Delete  
Name: SOSA, JOSE D  
Address: 1874 SW CLAMBAKE AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: DP ( ) Delete  
Name: PHILLIPS, PAMELA S  
Address: 1874 SW CLAMBAKE AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: DST ( ) Delete  
Name: SOSA, MARIA V  
Address: 1141 VIA JARDIN  
City-St-Zip: PALM BEACH GARDENS, FL 33418

**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:

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: JOSE D. SOSA

DVCS

07/14/2009

Electronic Signature of Signing Officer or Director

Date