

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000038

FILED
Apr 27, 2012
Secretary of State

Entity Name: BLANDINA INFANTE DRAPIZA FOUNDATION, INC.

Current Principal Place of Business:

6879 SHADOW CAST LANE
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

6879 SHADOW CAST LANE
LAKELAND, FL 33813

New Mailing Address:

FEI Number: 01-0553584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAPIZA, LILLIAN A
1402 LESLIE DR
LAKELAND, FL 33801 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
Name: DRAPIZA, ANDRES I
Address: 6879 SHADOW CAST LANE
City-St-Zip: LAKELAND, FL 33813

Title: VP
Name: DRAPIZA, RUDY
Address: 6879 SHADOW CAST LANE
City-St-Zip: MULBERRY, FL 33860

Title: T
Name: ARROYO, RUTH
Address: 6879 SHADOW CAST LANE
City-St-Zip: LAKELAND, FL 33813

Title: D
Name: WILKERSON, BLANDINA D
Address: 6879 SHADOW CAST LANE
City-St-Zip: LAKELAND, FL 33813

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: JAMES ALLEN

EA

04/27/2012

Electronic Signature of Signing Officer or Director

Date