

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001676

FILED
Jan 05, 2011
Secretary of State

Entity Name: MASON G. SMOAK FOUNDATION, INC.

Current Principal Place of Business:

720 SUNSET POINTE DRIVE
LAKE PLACID, FL 33852

New Principal Place of Business:

1025 CR 17 N
LAKE PLACID, FL 33852

Current Mailing Address:

720 SUNSET POINTE DRIVE
LAKE PLACID, FL 33852

New Mailing Address:

1025 CR 17 N
LAKE PLACID, FL 33852

FEI Number: 26-4287497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYLES, WILLIAM A ESQ.
301 E PINE ST., STE. 1400
ORLANDO, FL 32801 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: D
Name: SMOAK, TRACEE
Address: 720 SUNSET POINTE DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: VPD
Name: SMOAK, JR., EDWARD L
Address: 179 HUNTLEY OAKS BLVD
City-St-Zip: LAKE PLACID, FL 33852

Title: SD
Name: HODGE, RAY
Address: 19039 121 RD
City-St-Zip: MCALPIN, FL 32062

Title: D
Name: KOUKOS, PAUL
Address: 10 MEADOWLAKE DR
City-St-Zip: LAKE PLACID, FL 33852

Title: PD
Name: SUMMERS, DAVID
Address: 100 FOXWOOD DR
City-St-Zip: LAKE PLACID, FL 33852

Title: TD
Name: BIBLE, ANDREW
Address: 3705 GOLFVIEW RD
City-St-Zip: SEBRING, FL 33875

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: ANDREW S BIBLE

TD

01/05/2011

Electronic Signature of Signing Officer or Director

_____ Date