

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010873

FILED
Jan 20, 2012
Secretary of State

Entity Name: LESTER AND ANNE SCAFF FOUNDATION, INC.

Current Principal Place of Business:

134 SE COLBURN AVE
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

134 SE COLBURN AVE
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 27-1482286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCAFF, STAFFORD L JR
134 SE COLBURN AVE
LAKE CITY, FL 32025 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: SCAFF, STAFFORD L JR
Address: 134 SE COLBURN AVE
City-St-Zip: LAKE CITY, FL 32025

Title: D
Name: SCAFF, GARY K
Address: 22865 NE KENT ROAD
City-St-Zip: HOSFORD, FL 32324

Title: D
Name: DRAWDY, JENNY S
Address: 540 SW SAN JUAN PLACE
City-St-Zip: LAKE CITY, FL 32025

Title: D
Name: BROWN, KEITH W
Address: 757 SW RIDGE STREET
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: SCAFF, ANNE C
Address: 134 SE COLBURN AVE
City-St-Zip: LAKE CITY, FL 32025

Title: D
Name: CSERCSICS, BRIAN
Address: 204 MCDONALD BLVD
City-St-Zip: ACTON ONTARION CANADA L7J1B1, XX

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: STAFFORD L SCAFF, JR

D

01/20/2012

Electronic Signature of Signing Officer or Director

Date