

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10696

FILED
Jan 16, 2009
Secretary of State

Entity Name: MID-FLORIDA HOME BUILDERS FOUNDATION, INC.

Current Principal Place of Business:

ELIZABETH H. MCGEE
544 MAYO AVE
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

ELIZABETH H. MCGEE
544 MAYO AVE
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: 59-2617766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGEE, ELIZABETH H
544 MAYO AVENUE
MAITLAND, FL 32751 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: PD () Delete
Name: IANDOLI, PAUL
Address: 544 MAYO AVE
City-St-Zip: MAITLAND, FL 32751

Title: VPD () Delete
Name: SWANSON, THERESA
Address: 544 MAYO AVE
City-St-Zip: MAITLAND, FL 32751

Title: TD () Delete
Name: MORRIS, DEBORAH
Address: 544 MAYO AVE
City-St-Zip: MAITLAND, FL 32751

Title: ED () Delete
Name: MCGEE, ELIZABETH H
Address: 544 MAYO AVENUE
City-St-Zip: MAITLAND, FL 32751

Title: SD () Delete
Name: DELANEY, MICHELLE
Address: 544 MAYO AVENUE
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SWANSON, THERESA
Address: 544 MAYO AVE
City-St-Zip: MAITLAND, FL 32751

Title: VPD (X) Change () Addition
Name: DELANEY, MICHELLE
Address: 544 MAYO AVE
City-St-Zip: MAITLAND, FL 32751

Title: TD (X) Change () Addition
Name: BARTLETT, MELLANIE
Address: 544 MAYO AVE
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: MORRIS, DEBBIE
Address: 544 MAYO AVENUE
City-St-Zip: MAITLAND, FL 32751

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: ELIZABETH MCGEE

ED

01/16/2009

Electronic Signature of Signing Officer or Director

Date