

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000998

FILED
Apr 27, 2012
Secretary of State

Entity Name: NATIONAL FOUNDATION FOR CHILDREN OF WOUNDED WARRIORS, INC

Current Principal Place of Business:

3362 TURTLE COVE
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

3362 TURTLE COVE
WEST PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: 80-0680242 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SIMEONE, BOBBY
3362 TURTLE COVE
WEST PALM BEACH, FL 33411 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: SIMEONE, BOBBY
Address: 3362 TURTLE COVE
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: VP
Name: SIMEONE, VIVIAN
Address: 3362 TURTLE COVE
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: SEC
Name: NOQUERAS, WILLIAM S II
Address: 3362 TURTLE COVE
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: T
Name: GARLOW, SCOTT
Address: 3362 TURTLE COVE
City-St-Zip: WEST PALM BEACH, FL 33411 US

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: BOBBY SIMEONE

P

04/27/2012

Electronic Signature of Signing Officer or Director

Date