

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001201

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** FOUNDATION FOR INNOVATION, INC.

**Current Principal Place of Business:**

3210 S DALE MABRY AVENUE  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3210 S DALE MABRY AVENUE  
TAMPA, FL 33629

**New Mailing Address:**

**FEI Number:** 27-5248756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MANNERS, RICHARD  
3210 S DALE MABRY AVENUE  
TAMPA, FL 33629 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  
**Name:** MANNERS, RICHARD  
**Address:** 3210 S DALE MABRY AVENUE  
**City-St-Zip:** TAMPA, FL 33629

**Title:** D  
**Name:** ZELMAN, LUCY  
**Address:** 3210 S DALE MABRY AVENUE  
**City-St-Zip:** TAMPA, FL 33629

**Title:** D  
**Name:** EISCHEID, DAVID  
**Address:** 3210 S DALE MABRY AVENUE  
**City-St-Zip:** TAMPA, FL 33629

**Title:** D  
**Name:** EVERETT, ELIZABETH  
**Address:** 3210 S DALE MABRY AVENUE  
**City-St-Zip:** TAMPA, FL 33629

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:** RICHARD MANNERS

PD

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date