

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 01, 2012
Secretary of State

DOCUMENT# N11000003543

Entity Name: SUMTER SUNSHINE FOUNDATION, INC.**Current Principal Place of Business:**841 E. CR 48
BUSHNELL, FL 33513**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 2484
BUSHNELL, FL 33513**New Mailing Address:****FEI Number:** 27-5062397**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DIDION, ELLEN
10320 JOANIES RUN
LEESBURG, FL 34788 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: DIDION, ELLEN
Address: 10320 JOANIES RUN
City-St-Zip: LEESBURG, FL 34788

Title: VP
Name: GERINGSWALD, BILL
Address: 436 N. RHODES ST.
City-St-Zip: MT. DORA, FL 32757

Title: S
Name: PETERSON, LAURI
Address: 1720 N. NEW HAMPSHIRE AVE.
City-St-Zip: TAVARES, FL 32778

Title: T
Name: SULLIVAN, KEVIN
Address: 2055 STACEY DRIVE
City-St-Zip: MT. DORA, FL 32757

Title: D
Name: RICHARD, BENJAMEN DPM
Address: 17111 BERRIEN CT.
City-St-Zip: THE VILLAGES, FL 32159

Title: D
Name: SCOTT, SUE
Address: 930 CR 466
City-St-Zip: LADY LAKE, FL 32159

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: ELLEN DIDION

P

03/01/2012

Electronic Signature of Signing Officer or Director

Date