2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N12488

Entity Name: JORDAN AND SHIRLEY ANSBACHER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

3733 W. UNIVERSITY BLVD.
SUITE 115-A
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

3733 W. UNIVERSITY BLVD.
SUITE 115-A
JACKSONVILLE, FL 32217 US

New Mailing Address:

FEI Number: 59-2610694 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANSBACHER, JORDAN
3733 W. UNIVERSITY BLVD #115-A
JACKSONVILLE, FL 32217 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: ANSBACHER, JORDAN
Address: 2359 SEGOVIA AVENUE
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete
Name: ANSBACHER, BRIAN
Address: 3352 S.MAIDEN VOYAGE CIR
City-St-Zip: JACKSONVILLE, FL

Title: STD ( ) Delete
Name: ANSBACHER, SHIRLEY
Address: 2359 SEGOVIA AVENUE
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete
Name: COHEN, MICHELE
Address: 2361 PLAYERS POND LANE
City-St-Zip: HERNDON, VA

Title: D ( ) Delete
Name: HELMING, DONNA
Address: 2988 BERNICE DRIVE
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ANSBACHER, JORDAN
Address: 2359 SEGOVIA AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change ( ) Addition
Name: ANSBACHER, BRIAN
Address: 3352 S.MAIDEN VOYAGE CIR
City-St-Zip: JACKSONVILLE, FL 32223

Title: STD (X) Change ( ) Addition
Name: ANSBACHER, SHIRLEY
Address: 2359 SEGOVIA AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

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

Title: D (X) Change ( ) Addition
Name: HELMING, DONNA
Address: 2988 BERNICE DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

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: JORDAN ANSBACHER PD 04/27/2009
Electronic Signature of Signing Officer or Director Date