

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17908

**FILED**  
**Feb 10, 2011**  
**Secretary of State**

**Entity Name:** SPEN FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

46 N. WASHINGTON BLVD  
#27  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

46 N. WASHINGTON BLVD  
#27  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 59-2742185

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWNING, GEORGE, III  
46 N. WASHINGTON BLVD., #27  
SARASOTA, FL 34236 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: RODEHEFFER, MADELEINE S  
Address: 11215 SE 284TH ST  
City-St-Zip: AUBURN, WA 98092 US

Title: VD  
Name: GOLDBERG, PAUL  
Address: 7931 WINTERSET AVENUE  
City-St-Zip: BALTIMORE, MD 21203

Title: SD  
Name: BARNUM, SAMUEL  
Address: 706 HAIGHT ST  
City-St-Zip: SAN FRANCISCO, CA 94117 US

Title: TD  
Name: HERRON, WILLIAM  
Address: 5590 BEE RIDGE ROAD, BLD A, SUITE 3  
City-St-Zip: SARASOTA, FL 34233 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: MADELEINE S. RODEHEFFER

PRES

02/10/2011

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

\_\_\_\_\_  
Date