

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18358

FILED
Mar 02, 2009
Secretary of State

Entity Name: THE GERALD F. STOGNIEW, JR. PRIVATE FOUNDATION, INC.

Current Principal Place of Business:

10332 HOPMAN CT.
LARGO, FL 33777

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4250
LARGO, FL 33775

New Mailing Address:

10332 HOPMAN CT.
LARGO, FL 33777

FEI Number: 59-2761167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOGNIEW, ROSEMARY
10332 HOPMAN COURT
SEMINOLE, FL 33777 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: STOGNIEW, ROSEMARY,
Address: 10332 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

Title: STD () Delete
Name: STOGNIEW, GERALD F., SR.
Address: 10332 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

Title: VSD () Delete
Name: LAURIE, STACY
Address: 10322 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

Title: VSD () Delete
Name: STOGNIEW, KRISTEN
Address: 1033 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

Title: D (X) Delete
Name: O'REILLY, GERALD K
Address: 10332 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STOGNIEW, ROSEMARY
Address: 10332 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

Title: ST (X) Change () Addition
Name: O'REILLY, GERALD F
Address: 10332 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

Title: ST (X) Change () Addition
Name: LAURIE, STACY A
Address: 10322 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

Title: ST (X) Change () Addition
Name: STOGNIEW, KRISTEN J
Address: 1033 HOPMAN COURT
City-St-Zip: LARGO, FL 33777

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

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: ROSEMARY STOGNIEW

PD

03/02/2009

Electronic Signature of Signing Officer or Director

Date