

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18392

FILED  
Apr 20, 2007  
Secretary of State

**Entity Name:** WILLIAM C. DEMETREE, JR., FOUNDATION, INC.

**Current Principal Place of Business:**

3348 EDGEWATER DR  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

**Current Mailing Address:**

3348 EDGEWATER DR  
ORLANDO, FL 32804 US

**New Mailing Address:**

**FEI Number:** 59-2750694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEMETREE, MARY L  
3348 EDGEWATER DR  
ORLANDO, FL 32801 US

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

DEMETREE, MARY L  
3348 EDGEWATER DR  
ORLANDO, FL 32804 US

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:

04/20/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DST ( ) Delete  
Name: DEMETREE, WILLIAM C.,  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL

Title: VD ( ) Delete  
Name: DEMETREE, SARA N.,  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL

Title: PD ( ) Delete  
Name: DEMETREE, MARY L.,  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL

Title: D (X) Delete  
Name: DEMETREE, WILLIAM C., JR.  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VDST (X) Change ( ) Addition  
Name: DEMETREE, SARA N  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

Title: PD (X) Change ( ) Addition  
Name: DEMETREE, MARY L  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

Title: D (X) Change ( ) Addition  
Name: DEMETREE, WILLIAM C JR  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SARA N. DEMETREE

TRTE

04/20/2007

Electronic Signature of Signing Officer or Director

Date