


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # N18706 1. Entity Name LIZ WHITNEY TIPPETT FOUNDATION INC.	
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Principal Place of Business 13625 SW 73 CT MIAMI, FL 33158 US	Mailing Address P.O. BOX 561566 MIAMI, FL 33256
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DO NOT WRITE IN THIS SPACE



04032008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0083442	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LINDSLEY, JANET
13625 SW 73 CT
MIAMI, FL 33158**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000886125 04/18/08-80043-011 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDSLEY, WILLIAM 13625 SW 73 CT MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD LINDSLEY, JANET 13625 SW 73 CT MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANCHEZ, ALAN 13625 SW 73 CT MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDSLEY, MARILYN 12600 OLD CUTLER RD MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janet Lindsley **4/3/08 3052557655**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #