

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22285

FILED
Apr 06, 2006
Secretary of State

Entity Name: THE 4C FOUNDATION, INC.

Current Principal Place of Business:

3500 W. COLONIAL DR.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

3500 W. COLONIAL DR.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-2917065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDY, W. MARVIN
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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: SD () Delete
Name: FLOYD, ULYSSES
Address: 454 DOMINO DRIVE
City-St-Zip: ORLANDO, FL 32805

Title: DC () Delete
Name: EDDY, CARSON L
Address: 1031 W. MORSE BLVD, SUITE 200
City-St-Zip: WINTER PARK, FL 32789

Title: FD () Delete
Name: FRANK, PATRICIA E
Address: 3500 W. COLONIAL DR
City-St-Zip: ORLANDO, FL 32808

Title: PD () Delete
Name: GALLAGHER, COLLEEN
Address: 3500 W. COLONIAL DR
City-St-Zip: ORLANDO, FL 32808

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: FLOYD, ULYSSES
Address: 454 DOMINO DRIVE
City-St-Zip: ORLANDO, FL 32805 US

Title: CD (X) Change () Addition
Name: DOBY, MICHAEL
Address: 304 FORREST CREST COURT
City-St-Zip: OCOEE, FL 34761 US

Title: FD (X) Change () Addition
Name: FRANK, PATRICIA E
Address: 3500 W. COLONIAL DR
City-St-Zip: ORLANDO, FL 32808 US

Title: PD (X) Change () Addition
Name: GALLAGHER, COLLEEN
Address: 3500 W. COLONIAL DR
City-St-Zip: ORLANDO, FL 32808 US

Title: TD () Change (X) Addition
Name: SHAUGHNESSY, LINDA
Address: 1052 BUCKWOOD DRIVE
City-St-Zip: ORLANDO, FL 32806 US

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: PATRICIA E FRANK

FD

04/06/2006

Electronic Signature of Signing Officer or Director

Date