2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22285

Entity Name: THE 4C FOUNDATION, INC.

FILED Mar 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3500 W. COLONIAL DR. ORLANDO, FL 32808 **Current Mailing Address: New Mailing Address:** 3500 W. COLONIAL DR. ORLANDO, FL 32808 FEI Number: 59-2917065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARDY, W. MARVIN 1000 LÉGION PLACE, SUITE 1700 ORLANDO, FL 32801 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FLOYD, ULYSSES Name: Name: 454 DOMINO DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32805 US City-St-Zip: Title: CD () Delete Title: CD (X) Change () Addition DOBY, MICHAEL Name: FOREMAN, SUE Name: Address: 304 FORREST CREST COURT Address: 1940 SUMMERLAND AVENUE City-St-Zip: OCOEE, FL 34761 US City-St-Zip: WINTER PARK, FL 32789 US Title: FD () Delete Title: () Change () Addition FRANK, PATRICIA E Name: Name: 3500 W. COLONIAL DR Address: Address: City-St-Zip: ORLANDO, FL 32808 US City-St-Zip: () Delete Title: PD Title: () Change () Addition Name: GALLAGHER, COLLEEN Name: 3500 W. COLONIAL DR Address: Address: City-St-Zip: ORLANDO, FL 32808 US City-St-Zip: Title: () Delete Title: TD (X) Change () Addition SHAUGHNESSY, LINDA PRYOR, DEE ANNA Name: Name: 1052 BUCKWOOD DRIVE 1478 THORNHILL CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32806 US City-St-Zip: OVIEDO, FL 32765 US Title: () Delete Title: () Change (X) Addition PINELLAS, ANNA Name: Name: Address: Address: 1710 ORANGE VISTA BLVD KISSIMMEE, FL 34746 City-St-Zip: 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: PATRICIA FRANK FD 03/25/2008