2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2011
Secretary of State

DOCUMENT# N28579

Entity Name: THE COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

245 RIVERSIDE AVE, STE 310
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

245 RIVERSIDE AVE, STE 310
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-6150746 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WATERS, NINA M PRES
11828 TANYA TER. E
JACKSONVILLE, FL 32223 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: P
Name: WATERS, NINA M PRES
Address: 245 RIVERSIDE AVENUE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 32202

Title: T/VP
Name: SACERDOTE, GRACE M EXEC VP
Address: 245 RIVERSIDE AVENUE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 32202

Title: S
Name: ZELL, JOHN VP
Address: 245 RIVERSIDE AVENUE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 32202

Title: VP
Name: CYNTHIA, EDELMAN CHAIR
Address: 245 RIVERSIDE AVENUE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 32202

Title: A.S.
Name: RIDDICK, CHERYL VP
Address: 245 RIVERSIDE AVENUE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 32202

I hereby 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 all other like empowered.

SIGNATURE: GRACE SACERDOTE T/VP 02/03/2011
Electronic Signature of Signing Officer or Director Date