

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29971

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: THE GUARDIAN FOUNDATION, INC.

## Current Principal Place of Business:

105 SE 1ST AVE  
SUITE 7  
GAINESVILLE, FL 32601

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 24102  
GAINESVILLE, FL 32602 US

## New Mailing Address:

FEI Number: 59-2931440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOWARD, JOHN P  
P.O. BOX 24102  
GAINESVILLE, FL 32602 US

## Name and Address of New Registered Agent:

HOWARD, JOHN P  
622 SW 23RD PLACE  
GAINESVILLE, FL 32601 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: JOHN HOWARD

04/30/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: REMER, DAVE  
Address: P.O. BOX 24102  
City-St-Zip: GAINESVILLE, FL 32602

Title: TREA ( ) Delete  
Name: GLAESER, MITCH  
Address: 2145 SW 94TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32607

Title: VPD ( ) Delete  
Name: MALONEY, BARBARA  
Address: P.O. BOX 24102  
City-St-Zip: GAINESVILLE, FL 32602

Title: SD ( ) Delete  
Name: WOMACK, EVELYN  
Address: P.O. BOX 24102  
City-St-Zip: GAINESVILLE, FL 32602

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: WOMACK, EVELYN  
Address: P.O. BOX 24102  
City-St-Zip: GAINESVILLE, FL 32602

Title: TREA (X) Change ( ) Addition  
Name: KRIEDER, DAVID  
Address: P.O. BOX 24102  
City-St-Zip: GAINESVILLE, FL 32602

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

Title: SD (X) Change ( ) Addition  
Name: REMER, DAVE  
Address: P.O. BOX 24102  
City-St-Zip: GAINESVILLE, FL 32602

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: JOHN HOWARD

RA

04/30/2007

Electronic Signature of Signing Officer or Director

Date