

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 07, 2012
Secretary of State

DOCUMENT# N29971

Entity Name: THE GUARDIAN FOUNDATION, INC.**Current Principal Place of Business:**14 SOUTH MAIN STREET
GAINESVILLE, FL 32601**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 24102
GAINESVILLE, FL 32602 US**New Mailing Address:**14 SOUTH MAIN STREET
GAINESVILLE, FL 32601 US**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
622 SW 23RD PLACE
GAINESVILLE, FL 32601 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: PRES
Name: ZEGEL, CAROLE
Address: 11011 NW 12TH PL
City-St-Zip: GAINESVILLE, FL 32606

Title: TREA
Name: REMER, DAVID
Address: 14 S MAIN STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: VPD
Name: MCLEAN, MARILYN
Address: 425 SW 88TH TERR
City-St-Zip: GAINESVILLE, FL 32607

Title: SEC
Name: JENNINGS, BETTY
Address: 14 SOUTH MAIN ST.
City-St-Zip: GAINESVILLE, FL 32601

Title: DIR
Name: CRAWFORD, PAUL
Address: 14 S. MAIN STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: BRD
Name: SINGER, JEANNE
Address: 120 W UNIV AVE
City-St-Zip: GAINESVILLE, FL 32602

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: CAROLE ZEGEL

PRES

08/07/2012

Electronic Signature of Signing Officer or Director

Date