

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31061

FILED
Mar 21, 2009
Secretary of State

Entity Name: THE SECRIST FAMILY FOUNDATION, INC.

Current Principal Place of Business:

133 W SWOOPE AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 2673
WINTER PARK, FL 32790 US

New Mailing Address:

FEI Number: 59-2940793 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SECRIST, ROBERT L JR.
133 W SWOOPE AVE
WINTER PARK, FL 32789 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: MR. () Delete
Name: SECRIST, JR., ROBERT L P,D
Address: 133 W SWOOPE AVE
City-St-Zip: WINTER PARK, FL 32789

Title: MRS. () Delete
Name: SECRIST, PATRICIA A VP,S,D
Address: 133 W SWOOPE AVE
City-St-Zip: WINTER PARK, FL 32789

Title: MR. () Delete
Name: SECRIST III, ROBERT L D
Address: 1001 VIA TUSCANY OAKS WAY
City-St-Zip: WINTER PARK, FL 32789

Title: MRS. () Delete
Name: NEWNUM, JANE E D
Address: 1443 HIBISCUS AVE
City-St-Zip: WINTER PARK, FL 32789

Title: MR. () Delete
Name: SECRIST, JOSHUA J D
Address: 1407 DELANEY AVE
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: ROBERT. L. SECRIST, JR.

PRES

03/21/2009

Electronic Signature of Signing Officer or Director

_____ Date