## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N42897

FILED Apr 14, 2009 Secretary of State

Entity Name: ANDERSON FAMILY FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

871 NW GUERDON STREET 871 NW GUERDON STREET LAKE CITY, FL 320561829 LAKE CITY, FL 32055

**Current Mailing Address: New Mailing Address:** 

P O BOX 1829 P.O. BOX 1829

LAKE CITY, FL 320561829 US LAKE CITY, FL 32055 US

FEI Number: 59-3060087 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MCRAE, CHRIS MCRAE, CHRIS 1677 MÁHAN CTR BLVD

871 NW GUERDON STREET TALLAHASSEE, FL 32308 US LAKE CITY, FL 32055

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: 04/14/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

ANDERSON, JOE H JR ANDERSON, JOE H JR Name: Name:

HWY 349 N Address: HWY 349 N Address:

City-St-Zip: OLD TOWN, FL City-St-Zip: OLD TOWN, FL 32055

Title: DV () Delete Title: (X) Change ( ) Addition

ANDERSON, JOE H III Name: ANDERSON, JOE H III Name: Address: HWY 349 N Address: HWY 349 N

City-St-Zip: OLD TOWN, FL City-St-Zip: OLD TOWN, FL 32055

Title: DST () Delete Title: DST (X) Change ( ) Addition

WALL, HARRIET A. WALL, HARRIET A. Name: Name: HWY 349 N Address: HWY 349 N

Address: City-St-Zip: OLD TOWN, FL City-St-Zip: OLD TOWN, FL 32055

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition ANDERSON, MARION DOUGLAS ANDERSON, MARION DOUGLAS Name: Name:

Address: HWY 349 N Address: HWY 349 N OLD TOWN, FL City-St-Zip: City-St-Zip: OLD TOWN, FL 32055

Title: DV () Delete Title: (X) Change ( ) Addition MCRAE, TERRELL H MCRAE, TERRELL H Name: Name:

871 NW GUERDON STREET 871 NW GUERDON STREET Address: Address: City-St-Zip: LAKE CITY, FL 320561829 US City-St-Zip: LAKE CITY, FL 32055 US

Title: () Delete Title: (X) Change ( ) Addition

CHILDERS, CYNTHIA D ANDE CHILDERS, CYNTHIA D ANDE Name: Name:

Address: HWY 349 N Address: HWY 349 N

OLD TOWN, FL City-St-Zip: OLD TOWN, FL 32055 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: BRIAN SCHREIBER SECR 04/14/2009

Electronic Signature of Signing Officer or Director

Date