

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43511

FILED
Jan 14, 2009
Secretary of State

Entity Name: MEAD FAMILY FOUNDATION, INC.

Current Principal Place of Business:

198 FIRST STREET SOUTH
WINTER HAVEN, FL 338803004

New Principal Place of Business:

198 FIRST STREET SOUTH
WINTER HAVEN, FL 33880

Current Mailing Address:

198 FIRST STREET SOUTH
WINTER HAVEN, FL 338803004

New Mailing Address:

198 FIRST STREET SOUTH
WINTER HAVEN, FL 33880

FEI Number: 59-3139203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEDY, J. KELLY
198 FIRST STREET SOUTH
WINTER HAVEN, FL 338837604 US

Name and Address of New Registered Agent:

KENNEDY, J. KELLY
198 FIRST STREET SOUTH
WINTER HAVEN, FL 33880 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: J. KELLY KENNEDY

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MEAD, GORDON M.,
Address: 2981 NORTH POINTE DRIVE
City-St-Zip: SHREVEPORT, LA 71106

Title: DT () Delete
Name: MEAD, JULIE M
Address: 8025 QUARRY RIDGE WAY
City-St-Zip: BETHESDA, MD 20817

Title: DS () Delete
Name: KENNEDY, J. KELLY,
Address: 198 FIRST STREET, SOUTH
City-St-Zip: WINTER HAVEN, FL

Title: DV () Delete
Name: MEAD, GORDON M JR
Address: 220 WEST 26TH #407
City-St-Zip: NEW YORK, NY 10001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: KENNEDY, J. KELLY,
Address: 198 FIRST STREET, SOUTH
City-St-Zip: WINTER HAVEN, FL 33880

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: J. KELLY KENNEDY

S/D

01/14/2009

Electronic Signature of Signing Officer or Director

Date