

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48644

FILED
Jan 18, 2007
Secretary of State

Entity Name: TUAL FIRESTONE ANTHROPOLOGICAL RESEARCH FOUNDATION, INC.

Current Principal Place of Business:

9130 SOUTH DADELAND BOULEVARD
TWO DATRAN CENTER SUITE - 1609
MIAMI, FL 33156 US

New Principal Place of Business:

9130 SOUTH DADELAND BOULEVARD
C/O CRAIG DEARR SUITE - 1701
MIAMI, FL 33156 US

Current Mailing Address:

260 SEVEN FARMS DRIVE
SUITE - C
CHARLSTON, SC 29492 US

New Mailing Address:

FEI Number: 65-0330331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEARR, CRAIG R
9130 SOUTH DADELAND BOULEVARD
TWO DATRAN CENTER SUITE - 1609
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

DEARR, CRAIG R
9130 SOUTH DADELAND BOULEVARD
C/O CRAIG DEARR SUITE - 1701
MIAMI, FL 33156 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:

01/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FIRESTONE, ANNY TUAL
Address: 260 SEVEN FARMS DRIVE SUITE - C
City-St-Zip: CHARLESTON, SC 29492 US

Title: D () Delete
Name: FIRESTONE, MELVILLE
Address: 260 SEVEN FARMS DRIVE SUITE - C
City-St-Zip: CHARLESTON, SC 29492 US

Title: D () Delete
Name: SILVERS, ROBERT H
Address: 260 SEVEN FARMS DRIVE SUITE - C
City-St-Zip: CHARLESTON, SC 29492 US

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 SILVERS

D

01/18/2007

Electronic Signature of Signing Officer or Director

Date