2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2010
Secretary of State

DOCUMENT# N92000000328

Entity Name: MAYOR'S FEED THE HUNGRY PROGRAM, INC.

Current Principal Place of Business:

2 N TAMIAMI TRAIL
11TH FLOOR
SARASOTA, FL 342363423

New Principal Place of Business:

Current Mailing Address:

2 N TAMIAMI TRAIL
11TH FLOOR
SARASOTA, FL 342363423

New Mailing Address:

FEI Number: 65-0369363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWALLOW, JOEL
2 N TAMIAMI TRAIL
11TH FLOOR
SARASOTA, FL 342363423 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: D
Name: WARD, GILBERT
Address: 3731 SARASOTA BLVD. APT. # 302
City-St-Zip: SARASOTA, FL 34238

Title: DC
Name: SWALLOW, JOEL
Address: 2 N TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 342363423

Title: D
Name: POMYKALA, JOSEPH
Address: 2392 JAMES LANE
City-St-Zip: SARASOTA, FL 34231

Title: D
Name: BIEHLER, SCOTT
Address: 2814 WILLIAMSBURG ST
City-St-Zip: SARASOTA, FL 34231

Title: D
Name: MAGNUSON, DUANE
Address: 4120 COMINO REAL
City-St-Zip: SARASOTA, FL 34231

Title: D
Name: MILLER, HAROLD
Address: 1444 PINE BAY
City-St-Zip: SARASOTA, FL 34231

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: JOEL C. SWALLOW CHMN 03/31/2010

Electronic Signature of Signing Officer or Director — Date