2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# N92000000834

Entity Name: CLINT AND GERRY THOMAS FOUNDATION, INC.

Current Principal Place of Business:

1301 RIVERPLACE BLVD
STE 2640
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

3030 HARTLEY ROAD
STE 250
JACKSONVILLE, FL 32257 US

Current Mailing Address:

1301 RIVERPLACE BLVD
STE 2640
JACKSONVILLE, FL 32207 US

New Mailing Address:

3030 HARTLEY ROAD
STE 250
JACKSONVILLE, FL 32257 US

FEI Number: 59-3155455 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDERSON, KENNETH G
1301 RIVERPLACE BLVD
STE 2640
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

ANDERSON, KENNETH G
3030 HARTLEY ROAD
STE 250
JACKSONVILLE, FL 32257 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: _____ 01/30/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: THOMAS, CLINT
Address: 703 PONTE VEDRA BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DV ( ) Delete
Name: THOMAS, GERRY
Address: 703 PONTE VEDRA BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: BLUMEYER, CAROL T
Address: PO BOX 2047
City-St-Zip: PONTE VEDRA BEACH, FL

Title: AS ( ) Delete
Name: ANDERSON, KENNETH G
Address: 1301 RIVERPLACE BLVD STE 2640
City-St-Zip: JACKSONVILLE, FL

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: AS (X) Change ( ) Addition
Name: ANDERSON, KENNETH G
Address: 3030 HARTLEY ROAD STE 250
City-St-Zip: JACKSONVILLE, FL 32257

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: CLINT THOMAS DPST 01/30/2009
Electronic Signature of Signing Officer or Director — Date