

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Jan 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N93000003829**

1. Entity Name

CORPORAL LARRY SIEGEL FOUNDATION, INC.



Principal Place of Business

Mailing Address

8714 HIGHLAND AVE. N.  
TAMPA FL 33604-1333  
US

8714 HIGHLAND AVE. N.  
TAMPA FL 33604-1333  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

33-1140437

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEGEL, LARRY  
8714 HIGHLAND AVE. N.  
TAMPA FL 33604-1333

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: D ☐ Delete  
NAME: POKORNY, WILLIAM A  
STREET ADDRESS: 4213 SW 80TH STREET  
CITY- ST- ZIP: GAINESVILLE FL 32608

TITLE: D ☐ Delete  
NAME: POKORNY, ELIZABETH  
STREET ADDRESS: 4213 SW 80TH STREET  
CITY- ST- ZIP: GAINESVILLE FL 32608

TITLE: P ☐ Delete  
NAME: SIEGEL, LARRY  
STREET ADDRESS: 8714 HIGHLAND AVE., N.  
CITY- ST- ZIP: TAMPA FL 33601

TITLE: D ☐ Delete  
NAME: SIEGEL, MARY A  
STREET ADDRESS: 8714 N HIGHLAND AVE  
CITY- ST- ZIP: TAMPA FL 33603-1333

TITLE: D ☐ Delete  
NAME: SIEGEL, LAWRENCE JR  
STREET ADDRESS: 11873 HONEY LOCUST DRIVE  
CITY- ST- ZIP: JACKSONVILLE FL 32223

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:  
U00000605284  
01/30/07-80029-024 61.25

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \*

*Larry Siegel*

01/23/07 813-933-1929