

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003829

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** CORPORAL LARRY SIEGEL FOUNDATION, INC.

**Current Principal Place of Business:**

8714 HIGHLAND AVE. N.  
TAMPA, FL 336041333 US

**New Principal Place of Business:**

**Current Mailing Address:**

8714 HIGHLAND AVE. N.  
TAMPA, FL 336041333 US

**New Mailing Address:**

**FEI Number:** 33-1140437

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SIEGEL, LARRY  
8714 HIGHLAND AVE. N.  
TAMPA, FL 336041333 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 ( ) Delete  
Name: POKORNY, WILLIAM A  
Address: 4213 SW 80TH STREET  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: POKORNY, ELIZABETH  
Address: 4213 SW 80TH STREET  
City-St-Zip: GAINESVILLE, FL 32608

Title: P ( ) Delete  
Name: SIEGEL, LARRY  
Address: 8714 HIGHLAND AVE., N.  
City-St-Zip: TAMPA, FL 33601

Title: D ( ) Delete  
Name: SIEGEL, MARY A  
Address: 8714 N HIGHLAND AVE  
City-St-Zip: TAMPA, FL 336031333

Title: D ( ) Delete  
Name: SIEGEL, LAWRENCE JR  
Address: 11873 HONEY LOCUST DRIVE  
City-St-Zip: JACKSONVILLE, FL 32223

**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: ( ) 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 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: LAWRENCE SIEGEL, SR.

PRES

01/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date