2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# N93000004650

Entity Name: MICHAEL J. CARMICHAEL FAMILY FOUNDATION, INC.

Current Principal Place of Business:

2815 S. SEACREST BLVD
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

2815 S. SEACREST BLVD
BOYNTON BEACH, FL 33435 US

New Mailing Address:

FEI Number: 59-3205746 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITAKER, SCOTT L.
4653 SW 105TH DRIVE
GAINESVILLE, FL 32608 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: PD
Name: CARMICHAEL, MICHAEL J MD
Address: 950 ORCHID LANE
City-St-Zip: GULF STREAM, FL 33483

Title: STD
Name: WHITAKER, SCOTT L
Address: 4653 SW 105TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608

Title: VD
Name: CARMICHAEL, BECKI E
Address: 950 ORCHID LANE
City-St-Zip: GULF STREAM, FL 33483

Title: VD
Name: CARMICHAEL, ANDREW J
Address: 950 ORCHID LANE
City-St-Zip: GULF STREAM, FL 33483

Title: VD
Name: CARMICHAEL, STACI E
Address: 950 ORCHID LANE
City-St-Zip: GULF STREAM, FL 33483

Title: VD
Name: CARMICHAEL, MICHAEL B
Address: 950 ORCHID LANE
City-St-Zip: GULF STREAM, FL 33483

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: MICHAEL CARMICHAEL PD 01/05/2011

Electronic Signature of Signing Officer or Director Date