

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000289

FILED  
May 09, 2008  
Secretary of State

**Entity Name:** EDISON-FORD WINTER ESTATES FOUNDATION, INC.

**Current Principal Place of Business:**

1800 BOY SCOUT DR.  
FT. MYERS, FL 33902 US

**New Principal Place of Business:**

1800 BOY SCOUT DR.  
FT. MYERS, FL 33907 US

**Current Mailing Address:**

P O BOX 2368  
FT. MYERS, FL 339022368 US

**New Mailing Address:**

P. O. DRAWER 88  
FT. MYERS, FL 33902 US

FEI Number: 65-0525651      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GALLOWAY, SAM JR  
1800 BOY SOUTH DR  
FORT MYERS, FL 33901 US

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

GALLOWAY, SAM JR  
1800 BOY SCOUT DR  
FORT MYERS, FL 33907 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: SAM GALLOWAY, JR.

05/09/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GALLOWAY, SAM JR.  
Address: 1800 BOY SCOUT DR  
City-St-Zip: FORT MYERS, FL 33901

Title: ED ( ) Delete  
Name: HILL, BARBARA  
Address: 340 MADISON CT  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: GALLOWAY, SAM JR.  
Address: 1800 BOY SCOUT DR  
City-St-Zip: FORT MYERS, FL 33907

Title: D (X) Change ( ) Addition  
Name: BARR, WANDA F  
Address: 1800 BOY SCOUT DRIVE  
City-St-Zip: FORT MYERS, FL 33907

Title: TREA ( ) Change (X) Addition  
Name: HIGGINS, DAVID  
Address: 1800 BOY SCOUT DRIVE  
City-St-Zip: FORT MYERS, FL 33907

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: WANDA F. BARR

D

05/09/2008

Electronic Signature of Signing Officer or Director

Date