

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000507

Entity Name: LIBRA FOUNDATION, INC.

FILED  
Jan 15, 2009  
Secretary of State

## Current Principal Place of Business:

96 NE FOURTH AVENUE  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

## Current Mailing Address:

96 NE FOURTH AVENUE  
DELRAY BEACH, FL 33483 US

## New Mailing Address:

FEI Number: 65-0469849

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WERLY, JANE E  
96 NE FOURTH AVENUE  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

THISTLE, J. J  
30 SE FOURTH AVENUE  
DELRAY BEACH, FL 33483 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: J. JEFFREY THISTLE

01/15/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: WERLY, JANE E  
Address: 96 NE FOURTH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete  
Name: NICHOLS, HORACE S  
Address: 137 MARLBOROUGH ST.  
City-St-Zip: BOSTON, MA 02116

Title: D ( ) Delete  
Name: SMITH, THOMAS A  
Address: 96 N.E. FOURTH AVE  
City-St-Zip: DELRAY BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: THISTLE, J. J  
Address: 30 SE FOURTH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SMITH, THOMAS A  
Address: 96 N.E. FOURTH AVE  
City-St-Zip: DELRAY BEACH, FL 33483

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: THOMAS A. SMITH

D

01/15/2009

Electronic Signature of Signing Officer or Director

Date