

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N94000005187

1. Entity Name

PEARSON FAMILY FOUNDATION, INC.



Principal Place of Business

**235 COCONUT PALM ROAD
VERO BEACH, FL 32963**

Mailing Address

**235 COCONUT PALM ROAD
VERO BEACH, FL 32963**



01122006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

**4. FEI Number
59-3279393**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PEARSON, DAVID E
235 COCONUT PALM ROAD
VERO BEACH, FL 32963**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

**9. Election Campaign Financing
Trust Fund Contribution.**



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

10. OFFICERS AND DIRECTORS

**TITLE VPD
NAME PEARSON, DAVID E
STREET ADDRESS 235 COCONUT PALM ROAD
CITY-ST-ZIP VERO BEACH, FL 32963**

**TITLE PD
NAME PEARSON, CAROL M
STREET ADDRESS 235 COCONUT PALM ROAD
CITY-ST-ZIP VERO BEACH, FL 32963**

**TITLE SD
NAME GARVEY, JENNIFER L
STREET ADDRESS THREE RIVERGATE WOODS
CITY-ST-ZIP WILTON, CT 06897**

**TITLE TD
NAME BAKER, ERICA J
STREET ADDRESS 552 BISCAYNE LANE
CITY-ST-ZIP SEBASTIAN, FL 32958**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

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01/25/06-80007-019 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

David E Pearson