

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001769

FILED  
May 06, 2009  
Secretary of State

Entity Name: MY BROTHER'S/SISTER'S KEEPER SCHOLARSHIP FOUNDATION, INC.

**Current Principal Place of Business:**

675 ROYAL PALM BEACH BLVD.  
ROYAL PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

675 ROYAL PALM BEACH BLVD.  
ROYAL PALM BEACH, FL 33411

**New Mailing Address:**

FEI Number: 65-0672664      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:**

SANTAMARIA, CHRISTOPHER ESQ.  
675 ROYAL PALM BEACH BLVD.  
ROYAL PALM BEACH, FL 33411      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: PT      ( ) Delete  
Name: SANTAMARIA, JESS R  
Address: 255 PONDEROSA COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: ST      ( ) Delete  
Name: SANTAMARIA, VICTORIA  
Address: 255 PONDEROSA COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: T      ( ) Delete  
Name: TEMPLETON, STEVE  
Address: 222 LAKEVIEW AVE STE 1200  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T      ( ) Delete  
Name: JONES, ROBERT D  
Address: 590 ROYAL PALM BEACH BLVD.  
City-St-Zip: ROYAL PALM BEACH, FL 33411

**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:

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: VICTORIA SANTAMARIA

ST

05/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date