

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002208

FILED
Jan 04, 2006
Secretary of State

Entity Name: BLOGOSLAWSKI FAMILY FOUNDATION, INC.

Current Principal Place of Business:

POST OFFICE BOX 177
VERO BEACH, FL 32961

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 177
VERO BEACH, FL 32961

New Mailing Address:

FEI Number: 65-0668962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAKE, WALTER D
3 STARFISH DR
VERO BEACH, FL 37960 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: D () Delete
Name: BLAKE, WALTER D
Address: 3 STARFISH DRIVE
City-St-Zip: VERO BEACH, FL 37960

Title: D () Delete
Name: SULLIVAN, BRENDA L
Address: P.O. BOX 296
City-St-Zip: CROMWELL, CT 06416

Title: D () Delete
Name: BLOGOSLAWSKI, CHERYL S
Address: 34 EDBERT DRIVE
City-St-Zip: NEW BRITAIN, CT 06052

Title: D () Delete
Name: HOERLE, PATRICIA
Address: 34 EDBERT DRIVE
City-St-Zip: NEW BRITAIN, CT 06052

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 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: WALTER D. BLAKE

PRES

01/04/2006

Electronic Signature of Signing Officer or Director

Date