

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002729

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: VOLUNTEER FLORIDA FOUNDATION, INC.

## Current Principal Place of Business:

401 S. MONROE ST.  
TALLAHASSEE, FL 32301

## New Principal Place of Business:

## Current Mailing Address:

401 S. MONROE ST.  
TALLAHASSEE, FL 32301

## New Mailing Address:

FEI Number: 31-1467424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCFADDEN, LIZA  
401 S. MONROE ST.  
TALLAHASSEE, FL 32301 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: SANCHEZ, ALFRED  
Address: 1050 CARIBBEAN WAY  
City-St-Zip: MIAMI, FL 33132

Title: PCEO ( ) Delete  
Name: MCFADDEN, LIZA  
Address: 401 S. MONROE STREET  
City-St-Zip: TALLAHASSEE, FL 32301

Title: AA ( ) Delete  
Name: SANJUAN, MARIA T  
Address: SUITE 1200 ONE FINANCIA PLAZA  
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: DS ( ) Delete  
Name: WEINRICH, CARL L  
Address: ONE S. SCHOOL AVE.  
City-St-Zip: SARASOTA, FL 34297

Title: CH ( ) Delete  
Name: BISHOP, BARNEY T III  
Address: 516 N. ADAMS STREET  
City-St-Zip: TALLAHASSEE, FL 32301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: VIROSTEK, GWYNN  
Address: 40 EAST PALMETTO PARK RD.  
City-St-Zip: BOCA RATON, FL 33432

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

Title: TREA (X) Change ( ) Addition  
Name: GRIFFIN, DAVID  
Address: 801 1/2 N. CALHOUN ST.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: SEC (X) Change ( ) Addition  
Name: CESTARI, MAUREEN  
Address: 301 TOWER RD.  
City-St-Zip: NAPLES, FL 34113

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: LIZA MCFADDEN

PCEO

04/05/2006

Electronic Signature of Signing Officer or Director

Date