

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002729

FILED
Apr 16, 2009
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:

839 E. PARK AVENUE
SUITE B
TALLAHASSEE, FL 32301

Current Mailing Address:

401 S. MONROE ST.
TALLAHASSEE, FL 32301

New Mailing Address:

839 E. PARK AVENUE
SUITE B
TALLAHASSEE, FL 32301

FEI Number: 31-1467424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAMMEL, KAY
401 S. MONROE ST.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

KAMMEL, KAY DIR.
839 E. PARK AVENUE
SUITE B
TALLAHASSEE, FL 32301 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: KAY KAMMEL

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CH () Delete
Name: VIROSTEK, GWYNN
Address: 40 EAST PALMETTO PARK RD.
City-St-Zip: BOCA RATON, FL 33432

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

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

Title: VC () Delete
Name: CESTARI, MAUREEN
Address: 301 TOWER RD.
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PCEO (X) Change () Addition
Name: KAMMEL, KAY
Address: 839 E. PARK AVENUE, SUITE B
City-St-Zip: TALLAHASSEE, FL 32301

Title: TREA (X) Change () Addition
Name: GRANGER, TED
Address: 307 B EAST 7TH AVENUE
City-St-Zip: TALLAHASSEE, FL 32303

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: ROOSEVELT ALEXANDER

CFO

04/16/2009

Electronic Signature of Signing Officer or Director

Date