2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002761

FILED Jan 17, 2008 Secretary of State

Entity Name: SMITH-WILLIAMS SERVICE CENTER FOUNDATION, INC.

New Principal Place of Business: Current Principal Place of Business: 2295 PASCO ST TALLAHASSEE, FL 32310 **Current Mailing Address: New Mailing Address:** 2295 PASCO ST TALLAHASSEE, FL 32310 FEI Number: 59-3417000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLMES, FRANKLIN D 2295 PASCO ST TALLAHASSEE, FL 32310 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BUTLER, EUGENE Name: Name: 725 GREENLEAF DR Address: Address: City-St-Zip: TALLAHASSEE, FL 32305 City-St-Zip: Title: () Delete Title: () Change () Addition Name: OKEKE, MARIA Name: Address: 3226 DUNGARVAN DR. Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: Title: () Delete Title: (X) Change () Addition STATEN, URSULA Name: FRANKLIN, LEONARD Name: 2109 SAXON ST 5660 OLD HICKORY LANE Address: Address: City-St-Zip: TALLAHASSEE, FL 32310 City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: (X) Change () Addition Name: HOWARD, VIOLA E Name: BRUTON, QUEEN E Address: 42 MOSE GAVIN LANE Address: 111 LINCOLN ST. City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: TALLAHASSEE, FL 32301

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: FRANKLIN HOLMES MR. 01/17/2008