2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003516

SARASOTA, FL 34236 US

Title:

FILED Apr 02, 2009 Secretary of State

Entity Name: ROY C. AND SUSAN M. PALMER FAMILY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2052 BEN FRANKLIN DR 9951 CHERRY HILLS AVENUE CIRCLE

VILLA D202 BRANDENTON, FL 34202 SARASOTA, FL 34236

New Mailing Address: Current Mailing Address:

2052 BEN FRANKLIN DR 9951 CHERRY HILLS AVENUE CIRCLE

VILLA D202 BRANDENTON, FL 34202 SARASOTA, FL 34236 US

FEI Number: 31-1471328 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:

PALMER, ROY C PALMER, ROY C 2052 BEN FRANKLIN DR 9951 CHÉRRY HILLS AVENUE CIRCLE VILLA D202 BRANDENTON, FL 34202

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: 04/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VSD

() Delete (X) Change () Addition

PALMER, ROY C PALMER, ROY C Name: Name: 2052 BEN FRANKLIN DR VILLA D202 Address: 9951 CHERRY HILLS AVENUE CIRCLE Address:

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: BRANDENTON, FL 34202

VSD () Delete Title: (X) Change () Addition PALMER, SUSAN M Name: PALMER, SUSAN M Name:

Address: 2052 BEN FRANKLIN DR VILLA D202 Address: 9951 CHERRY HILLS AVENUE CIRCLE

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: BRANDENTON, FL 34202

Title: () Delete Title: (X) Change () Addition CLAYBOURN, PALMER Name: CLAYBOURN, PALMER Name:

2052 BEN FRANKLIN DR VILLA D202 9951 CHERRY HILLS AVENUE CIRCLE Address: Address:

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: BRANDENTON, FL 34202

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: ROY C. PALMER PTD 04/02/2009