2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005907

FILED Feb 29, 2012 Secretary of State

Entity Name: THE JERRY ORNS/MIDAS FAMILY FOUNDATION, INC.

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

12406 WINDTREE BLVD.
SEMINOLE, FL 33772

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SEMINOLE, FL 33772 U

Current Mailing Address: New Mailing Address:

12406 WINDTREE BLVD.

SEMINOLE, FL 33772 US

12406 WINDTREE BLVD.

12406 WINDTREE BLVD.

SEMINOLE, FL 33772 UN

FEI Number: 59-3413420 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:

LONNIE, ORNS D 12406 WINDTREE BLVD SEMINOLE, FL 33772 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:

Γitle: PTD

Name: ORNS, DONNA

Address: 12406 WINDTREE BLVD City-St-Zip: SEMINOLE, FL 33772 US

Title: VSD

Name: ORNS, DONNA

Address: 12406 WINDTREE BLVD City-St-Zip: SEMINOLE, FL 33772 US

Title:

Name: ORNS, LONNIE Address: 11050 9TH ST. BAST

City-St-Zip: TREASURE ISLAND, FL 33706 US

Title:

Name: KITENPLON, IVY
Address: 12406 WINDTREE BLVD
City-St-Zip: SEMINOLE, FL 34642 US

Title:

Name: MORRIS, PAMELA

Address: 2903 W. BAYSHORE COURT City-St-Zip: TAMPA, FL 33611 US

Title: D

Name: ORNS, JILL

Address: 7278 MAIDENCANE CT City-St-Zip: LARGO, FL 33777 US

I hereby 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 all other like empowered.

SIGNATURE: LONNIE ORNS DT 02/29/2012