

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000518

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** THE ROBERT B. & MARCIA M. COSTELLO FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

65 TIDY ISLAND BLVD  
BRADENTON, FL 34210

**New Principal Place of Business:**

**Current Mailing Address:**

65 TIDY ISLAND BLVD  
BRADENTON, FL 34210

**New Mailing Address:**

**FEI Number:** 65-0739808

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAND, DAVID S  
240 S PINEAPPLE AVE  
10TH FL  
SARASOTA, FL 34236 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: VSD ( ) Delete  
Name: GRAVES, DOMINIC J  
Address: 65 TIDY ISLAND BLVD  
City-St-Zip: BRADENTON, FL 34210

Title: D ( ) Delete  
Name: KLINGENSMITH, RAYMOND L  
Address: 7 HATSAWAP  
City-St-Zip: CAMBRIDGE, MA 21613

Title: ASD ( ) Delete  
Name: BAND, DAVID S  
Address: 240 SO PINEAPPLE AVE. 10TH FLOOR  
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete  
Name: HANAN, BENJAMIN R  
Address: 240 SO PINEAPPLE AVE. 10TH FLOOR  
City-St-Zip: SARASOTA, FL 34236

Title: PTD ( ) Delete  
Name: COSTELLO, MARCIA  
Address: 65 TIDY ISLAND BLVD  
City-St-Zip: BRADENTON, FL 34210

Title: D ( ) Delete  
Name: DOERR, KENNETH D  
Address: 240 S. PINEAPPLE AVE., 10TH FLOOR  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: MARCIA COSTELLO

D

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date