2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002566

Entity Name: HUDSON FAMILY FOUNDATION, INC.

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Ourient i inicipal i lace of Dusiness.	New I Interput I face of Dasiness

1850 SE 17TH ST 1535 SE 17TH ST SUITE 300 SUITE 107

FT. LAUDERDALE, FL 33316 FT. LAUDERDALE, FL 33316

Current Mailing Address: New Mailing Address:

1850 SE 17TH ST 1535 SE 17TH ST SUITE 300 SUITE 107

FT. LAUDERDALE, FL 33316 FT. LAUDERDALE, FL 33316

FEI Number: 65-0753612 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:

 HUDSON, HOLLY J
 HUDSON, HOLLY J

 1850 SE 17TH STE 300
 1535 SE 17TH STE 107

FT. LAUDERDALE, FL 33316 US FT. LAUDERDALE, FL 33316 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: 03/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: D (X) Change () Addition

 Name:
 WRIGHT, PETER W
 Name:
 WRIGHT, PETER W

 Address:
 1850 SE 17TH STREET SUITE 300
 Address:
 1535 SE 17TH STREET SUITE 107

 City-St-Zip:
 FORT LAUDERDALE, FL 33316
 City-St-Zip:
 FORT LAUDERDALE, FL 33316

Title: DVS () Delete Title: () Change () Addition

 Name:
 HUDSON, STEVEN W
 Name:

 Address:
 529 BONTONA AVE.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33301
 City-St-Zip:

Title: DPT () Delete Title: () Change () Addition

 Name:
 HUDSON, HOLLY J
 Name:

 Address:
 529 BONTONA AVE.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33301
 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: STEVEN W. HUDSON DVS 03/27/2009