

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N97000002589**

1. Entity Name

THE LYDEN FOUNDATION, INC.



Principal Place of Business

1960 HOWELL BRANCH ROAD  
WINTER PARK FL 32792

Mailing Address

P O BOX 700  
WINTER PARK FL 32790  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3469366

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHUFFIELD, W C  
GATEWAY CENTER SUITE 1700  
ORLANDO FL 32801

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature is required when returning)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME  
D LYDEN, JAMES P  
STREET ADDRESS  
1960 HOWELL BRANCH ROAD  
CITY- ST- ZIP  
WINTER PARK FL 32792

TITLE ☐ Change ☐ Addition  
NAME  
U000000836943  
STREET ADDRESS  
03/04/08-80037-001 61.25  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
D LYDEN, KRISTIN M  
STREET ADDRESS  
1960 HOWELL BRANCH ROAD  
CITY- ST- ZIP  
WINTER PARK FL 32792

TITLE ☐ Change ☐ Addition  
NAME  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
D LYDEN, SCOTT A  
STREET ADDRESS  
1960 HOWELL BRANCH ROAD  
CITY- ST- ZIP  
WINTER PARK FL 32792

TITLE ☐ Change ☐ Addition  
NAME  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
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CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James P. Lyden* James P. Lyden 2-15-08 407-679-8181