2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2009
Secretary of State

DOCUMENT# N97000004579

Entity Name: I.B. SUPPORT FOUNDATION, INC.

Current Principal Place of Business:

500 W. MAXWELL ST.
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

500 W. MAXWELL ST
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 59-3495149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUSTON, GARY W
BEGGS & LANE, 3 W. GARDEN ST., STE. 600
PENSACOLA, FL 32501 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: T ( ) Delete
Name: FLEISCHHAUER, REBECCA
Address: 4220 MONTALVO DR
City-St-Zip: PENSACOLA, FL 32504

Title: P ( ) Delete
Name: BRANCO, JENNIFER
Address: 95 CHANTECLAIRE CIRCLE
City-St-Zip: GULF BREEZE, FL 32561

Title: V ( ) Delete
Name: STEARNS, DEBORAH
Address: 3260 HYDE PARK ROAD
City-St-Zip: PENSACOLA, FL 32503

Title: S ( ) Delete
Name: VAN GALEN, MARY
Address: 4190 N CAMBRIDGE WAY
City-St-Zip: PACE, FL 32571

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:

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: REBECCA T FLEISCHHAUER TREA 03/21/2009

Electronic Signature of Signing Officer or Director — Date