

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006376

FILED
Mar 20, 2009
Secretary of State

Entity Name: TRACY FARMER FOUNDATION, INC.

Current Principal Place of Business:

8665 BAY COLONY DR
SUITE 1804
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

8665 BAY COLONY DR
SUITE 1804
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 59-3477176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNDERWOOD, ROBERT L III
5728 MAJOR BLVD
STE 550
ORLANDO, FL 32819 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: PCD () Delete
Name: FARMER, TRACY
Address: 8665 BAY COLONY DR, SUITE 1804
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: FARMER, CAROL
Address: 8665 BAY COLONY DR, SUITE 184
City-St-Zip: NAPLES, FL 34108

Title: SD () Delete
Name: FARMER, DEL
Address: 8111 SHELBYVILLE RD
City-St-Zip: LOUISVILLE, KY 40222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: FARMER, DEL
Address: 8001 SHELBYVILLE RD
City-St-Zip: LOUISVILLE, KY 40222

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: TRACY FARMER

PCD

03/20/2009

Electronic Signature of Signing Officer or Director

Date