2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006623

FILED Jan 20, 2011 Secretary of State

Entity Name: THE FRANK M. WOLFE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

505 N. ORLANDO AVENUE 505 N. ORLANDO AVENUE 3RD FLOOR COCOA BEACH, FL 32931

COCOA BEACH, FL 32931

Current Mailing Address: New Mailing Address:

P.O. BOX 321299

COCOA BEACH, FL 32932 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

WOLFE, FRANK M 505 N. ORLANDO AVENUE PTHSE COCOA BEACH, FL 32931 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: WOLFE, FRANK M

Address: 505 N. ORLANDO AVE.. PTHSE City-St-Zip: COCOA BEACH, FL 32931 US

Title: D

 Name:
 LEBLANC, JENNIFER L

 Address:
 P.O. BOX #410883 N/A

 City-St-Zip:
 MELBOURNE, FL 329410883

Title:

Name: MEDINA, MARIA L Address: 505 N. ORLANDO AVE.

City-St-Zip: COCOA BEACH, FL 329321299 US

Title: D

Name: BAUGHER, ROBERT A
Address: 2210 S. ATLANTIC AVE
City-St-Zip: COCOA BEACH, FL 32931

Title:

Name: STRICKLAND, JAMES A
Address: 2090 N. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: FRANK WOLFE D 01/20/2011