

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006899

FILED
May 11, 2009
Secretary of State

Entity Name: THE OLIVER C. AND JULIA L. HAMISTER FAMILY FOUNDATION INC.

Current Principal Place of Business:

5016 64TH DRIVE WEST
BRADENTON, FL 342104053

New Principal Place of Business:

Current Mailing Address:

5016 64TH DRIVE WEST
BRADENTON, FL 342104053

New Mailing Address:

FEI Number: 65-0800152 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HAMISTER, RICHARD C
5016 64TH DRIVE WEST
BRADENTON, FL 342104140 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: PTD () Delete
Name: HAMISTER, OLIVER C.
Address: 5016 64TH DRIVE WEST
City-St-Zip: BRADENTON, FL 34210

Title: VSP () Delete
Name: HAMISTER, JULIA L.
Address: 5016 64TH DRIVE WEST
City-St-Zip: BRADENTON, FL 34210

Title: VP (X) Delete
Name: HAMISTER, RICHARD C.
Address: 19 LAKERIDGE DRIVE
City-St-Zip: ORCHARD PARK, NY 14127

Title: VP () Delete
Name: HAMISTER, JAMES W.
Address: 11 BRIAR HILL ROAD
City-St-Zip: ORCHARD PARK, NY 14127

Title: VP () Delete
Name: BONEBRAKE, LISA H.
Address: 13010 WATERFORD RUN DRIVE
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: HAMISTER, RICHARD C
Address: 19 LAKERIDGE DRIVE
City-St-Zip: ORCHARD PARK, NY 14127

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

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

Title: VP (X) Change () Addition
Name: HAMISTER, JAMES W.
Address: 5132 STABELTON DRIVE
City-St-Zip: MASON, OH 45040

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: RICHARD C. HAMISTER

PRES

05/11/2009

Electronic Signature of Signing Officer or Director

Date