2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006982

FILED Apr 28, 2009 Secretary of State

Entity Name: THE HILLMYER-TREMONT STUDENT ATHLETE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 10481 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912 **Current Mailing Address: New Mailing Address:** 8961 CONFERENCE DRIVE SUITE 2 FORT MYERS, FL 33919 FEI Number: 65-0803239 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STROEMER & COMPANY, PA STROEMER & COMPANY, PA 8961 CONFERENCE DRIVE 14030 METROPOLIS AVE SUITE 2 SUITE 200 FORT MYERS, FL 33919 US FORT MYERS, FL 33912 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: 04/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HILLMYER, BARRY HILLMYER, BARRY Name: Name: 10481 SIX MILE CYPRESS PARKWAY Address: 10481 SIX MILE CYPRESS PARKWAY Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33912 () Delete Title: Title: (X) Change () Addition STROEMER, JOHN H CPA Name: STROEMER, JOHN H CPA Name: Address: 8961 CONFERENCE DRIVE, SUITE 2 Address: 14030 METROPOLIS AVE. STE 200 City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33912 Title: () Delete Title: PD (X) Change () Addition MCMURRAY, DARIN GNAGEY, BONNIE H Name: Name: 7866 GO CANES WAY 12910 KEDLESTON CIR Address: Address: City-St-Zip: FORT MYERSS, FL 33966 City-St-Zip: FORT MYERS, FL 33912 Title: () Delete Title: () Change () Addition Name: CRIMALDI, SAM B Name: 10481 SIX MILE CYPRESS PKWY Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: Title: () Delete Title: () Change () Addition SWANSON, DUANE Name: Name: 15761 GREY FRIAR COURT Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: Title: () Delete Title: () Change () Addition WILES, MARK Name: Name: Address: 7851 SUPPLY DRIVE Address: FORT MYERS, FL 33912 City-St-Zip: 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: JOHN H STROEMER T/D 04/28/2009