

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007199

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** PRIDMORE FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

C/O JAN PRIDMORE  
265 PELICAN DRIVE  
MELBOURNE BEACH, FL 32951 US

**New Principal Place of Business:**

JAN PRIDMORE  
295 PELICAN DRIVE  
MELBOURNE BEACH, FL 32951 US

**Current Mailing Address:**

C/O JAN PRIDMORE  
265 PELICAN DRIVE  
MELBOURNE BEACH, FL 32951 US

**New Mailing Address:**

JAN PRIDMORE  
295 PELICAN DRIVE  
MELBOURNE BEACH, FL 32951 US

**FEI Number:** 59-3491775

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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: D  
Name: DETTMER, DALE A  
Address: 304 S. HARBOR CITY BLVD, SUITE 201  
City-St-Zip: MELBOURNE, FL 32901

Title: DPST  
Name: PRIDMORE, JAN  
Address: 295 PELICAN DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D  
Name: CRANE, STEPHEN A  
Address: P.O. BOX 3391  
City-St-Zip: TAMPA, FL 33601

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: JAN PRIDMORE

PRES

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date