

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000802

FILED
Mar 31, 2009
Secretary of State

Entity Name: THE MARY KAY AND JAMES D. FARLEY FUND, INC.

Current Principal Place of Business:

NORTHERN TRUST BANK
11301 U.S. HIGHWAY ONE
NORTH PALM BEACH, FL 334083220

New Principal Place of Business:

Current Mailing Address:

NORTHERN TRUST BANK
11301 US HWY ONE
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 31-1590199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESSLY, JR., JAMES G ESQ.
222 LAKEVIEW AVENUE
SUITE 910
WEST PALM BEACH, FL 33401 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: C () Delete
Name: FARLEY, MARY KAY
Address: 7107 SE GOLFHOUSE DR
City-St-Zip: HOBE SOUND, FL 33455

Title: VTDP () Delete
Name: FARLEY, JAMES D
Address: 7107 SE GOLFHOUSE DR
City-St-Zip: HOBE SOUND, FL 33455

Title: SD () Delete
Name: JOHNSON, JEFFREY L
Address: 11301 US HWY ONE
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: FARLEY, FRANCES ANNE
Address: 281 CORRIE ROAD
City-St-Zip: ANN ARBOR, MI 48105

Title: D () Delete
Name: FARLEY, JAMES D JR.
Address: 518 10TH ST
City-St-Zip: SANTA MONICA, CA 904022818

Title: D () Delete
Name: FARLEY, KATHRYN T
Address: 860 PEACHTREE ST NE UNIT 1718
City-St-Zip: ATLANTA, GA 30308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JEFFREY L. JOHNSON

SD

03/31/2009

Electronic Signature of Signing Officer or Director

Date