

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001058

FILED
Jan 15, 2008
Secretary of State

Entity Name: THE SHAWN ELLIOTT TRANSPLANT MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

6085 LAST CHANCE ROAD
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

6085 LAST CHANCE RD
MILTON, FL 32570 US

New Mailing Address:

FEI Number: 62-1742035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, JANET E
6085 LAST CHANCE ROAD
MILTON, FL 32570 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: PD () Delete
Name: BROWN, JANET E
Address: 6085 LAST CHANCE ROAD
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: BROWN, CLARENCE L
Address: 5649 TREVINO DR
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: MEADOWS, MISTY M
Address: 101 PULLEY RD
City-St-Zip: HAVELOCK, NC 28532

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:

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: JANET E BROWN

PD

01/15/2008

Electronic Signature of Signing Officer or Director

Date