2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2007
Secretary of State

DOCUMENT# N98000001099

Entity Name: DOUGLASS RYAN BLOSSER FOUNDATION, INC.

Current Principal Place of Business:

5525 47TH CT. E.
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

PO BOX 50425
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-0809500 **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:

BLOSSER, GREG
P. O. BOX 50425
SARASOTA, FL 34232 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 ( ) Delete
Name: BLOSSER, BRENT
Address: P O BOX 50425
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete
Name: BLOSSER, GREG
Address: P O BOX 50425
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete
Name: BLOSSER, CINDY
Address: P O BOX 50425
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete
Name: BLOSSER, DARRYL
Address: P O BOX 50425
City-St-Zip: SARASOTA, FL 34232

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
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: BRENT BLOSSER D 05/22/2007

Electronic Signature of Signing Officer or Director — Date