

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003639

FILED
Apr 15, 2009
Secretary of State

Entity Name: FOR PETE'S SAKE FOUNDATION, INC.

Current Principal Place of Business:

4041 S.W. 47TH AVENUE
FORT LAUDERDALE, FL 33317

New Principal Place of Business:

Current Mailing Address:

4041 S.W. 47TH AVENUE
FORT LAUDERDALE, FL 33317

New Mailing Address:

FEI Number: 65-0845406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORNAU, PETER G
4041 SW 41ST AVE
FORT LAUDERDALE, FL 33314 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: DORNAU, PETER
Address: 4041 S.W. 47TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: STD () Delete
Name: DORNAU, MAUREEN
Address: 4041 S.W. 47TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: D () Delete
Name: DORNAU, GREGOR
Address: 4041 S.W. 47TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: D () Delete
Name: LUZZO, SUZANNE
Address: 13703 NORTH COUNTY HWY. 225
City-St-Zip: RIDDICK, IL 32686

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: JEFFREY BAROCAS

CFO

04/15/2009

Electronic Signature of Signing Officer or Director

Date