## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000003781

FILED Mar 10, 2010 Secretary of State

Entity Name: RAMSEUR FAMILY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

803 BEN LOMOND DR. 803 BEN LOMOND DR.

TEMPLE TERR., FL 33617 TEMPLE TERRACE, FL 33617

Current Mailing Address: New Mailing Address:

803 BEN LOMOND DR. 803 BEN LOMOND DR.

TEMPLE TERR., FL 33617 TEMPLE TERRACE, FL 33617

FEI Number: 59-3522100 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RAMSEUR, HENRY M 803 BEN LOMOND DR. RAMSEUR, HENRY M 803 BEN LOMOND DR.

TEMPLE TERR., FL 33617 US TEMPLE TERRACE, FL 33617 US

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: 03/10/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: RAMSEUR, HENRY M Address: 803 BEN LOMOND DR. City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VD

 Name:
 RAMSEUR, JOHN M

 Address:
 803 BEN LOMOND DR.

 City-St-Zip:
 TEMPLE TERRACE, FL 33617

Title: V

 Name:
 RAMSEUR, SUSAN M

 Address:
 803 BEN LOMOND DR.

 City-St-Zip:
 TEMPLE TERRACE, FL 33617

Title: STD

 Name:
 RAMSEUR, JEANNE M

 Address:
 803 BEN LOMOND DR.

 City-St-Zip:
 TEMPLE TERRACE, FL
 33617

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: HENRY M RAMSEUR PD 03/10/2010