## \_2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT



**Secretary of State** 03-27-2008 90025 024 \*\*\*\*61.25

**FILED** Mar 27, 2008 8:00 am

DOCUMENT # N98000004894 1. Entity Name
THE PAVER FAMILY FOUNDATION, INC.

Principal Place of Business 4370 S. TAMIAMI TRAIL STE. 242

SARASOTA, FL 34231

Mailing Address 4370 S. TAMIAMI TRAIL STE. 242 SARASOTA, FL 34231

3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc.

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4000ecc.

CR2E037 (12/06)

City & State		City & State		4. FEI Number 65-0860386		Not Applicable	e		
Zip	Country	Zip	Countr	5. Certificate of Status Desired		\$8.75 Additional Fee Required			
6	6. Name and Address of Current Registered Agent 7. Name				Name and Address of New Registered Agent				
				lomo					

PAVER, PAUL L 4370 S. TAMIAMI TRAIL SARASOTA, FL 34231

Street Address (P.O. Box Number is Not Acceptable) Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

	Signature, typed or printed name of registered agent and title if applic	able. (NOTE	: Registered Agent signature re	quired when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	Make check payable to Florida Department of St		
10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD PAVER, PAUL L 4370 S. TAMIAMI TRAIL SARASOTA, FL 34231	<b>⊠</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PAVER, DORIS M 4370 S. TAMIAMI TRAIL SARASOTA, FL 34231	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAVER, RANDA L 4370 S. TAMIAMI TRAIL SARASOTA, FL 34231	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAINE, ANDREA L 4370 S. TAMIAMI TRAIL SARASOTA, FL 34231	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARTON, PAMELA S 4370 S. TAMIAMI TRAIL SARASOTA, FL 34231	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PAVER, DIANA L 4370 S. TAMIAMI TRAIL SARASOTA, FL 34231	☐ Delete	CITY-ST-ZIP	PSD DIANA L. PAUER 1370 S. Tamiam Sanasota, Fl	Change  Tr.  Sur 31	Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: .

Pc Diana SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR