

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005519

FILED  
Mar 26, 2008  
Secretary of State

Entity Name: SUSAN R. AND JOHN W. SULLIVAN FOUNDATION, INC.

**Current Principal Place of Business:**

851 SE MONTEREY COMMONS BLVD  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

851 SE MONTEREY COMMONS BLVD  
STUART, FL 34996

**New Mailing Address:**

FEI Number: 22-2612047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SOPKO, JAMES  
853 SE MONTEREY COMMONS BLVD.  
STUART, FL 34996 US

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

FOWLER, WILLIAM C  
851 SE MONTEREY COMMONS BLVD.  
STUART, FL 34996 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: WILLIAM C. FOWLER

03/26/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SULLIVAN, JOHN W  
Address: 7211 SE GOLFHOUSE DR.  
City-St-Zip: HOBE SOUND, FL 33455

Title: DVTS ( ) Delete  
Name: SULLIVAN, SUSAN R  
Address: 7211 SE GOLFHOUSE DR.  
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete  
Name: SULLIVAN, BOLTON II  
Address: 2527 25TH COURT  
City-St-Zip: JUPITER, FL 33477

Title: D ( ) Delete  
Name: BOWEN, GIERIET S  
Address: 721 MACLEAN AVE  
City-St-Zip: KENILWORTH, IL 60043

Title: D ( ) Delete  
Name: SULLIVAN, JOHN W JR.  
Address: 377 WALNUT  
City-St-Zip: WINNETKA, IL 60093

Title: D ( ) Delete  
Name: SANFORD, JENNIFER S  
Address: 800 RICHLAND STREET  
City-St-Zip: COLUMBIA, SC 29201

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SULLIVAN, BOLTON II  
Address: 100 CAPE POINTE CIRCLE  
City-St-Zip: JUPITER, FL 33477

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: JOHN W. SULLIVAN

PRES

03/26/2008

Electronic Signature of Signing Officer or Director

Date