

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006318

FILED  
Feb 11, 2010  
Secretary of State

**Entity Name:** BODINE FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

3838 TAMIAMI TR. N. STE.#300  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

3838 TAMIAMI TR. N. STE.#300  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 65-0874850

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOODMAN BREEN & GIBBS, PA  
3838 TAMIAMI TRAIL NORTH SUITE 300  
NAPLES, FL 34103 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  
**Name:** BODINE, ROBERT J  
**Address:** 4351 GULF SHORE BLVD. N. #9S  
**City-St-Zip:** NAPLES, FL 34103

**Title:** D  
**Name:** BODINE, JOANNE W  
**Address:** 4351 GULF SHORE BLVD. N. #9S  
**City-St-Zip:** NAPLES, FL 34103

**Title:** D  
**Name:** LLOYD, CAROL  
**Address:** 00 DROMARA ROAD  
**City-St-Zip:** ST. LOUIS, MO 63124

**Title:** D  
**Name:** GARRETT, GAYLE  
**Address:** 4 EDGEWOOD DRIVE  
**City-St-Zip:** ST. LOUIS, MO 63124

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:** ROBERT J. BODINE

D

02/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date