

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006766

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** KEITH STRAGHN MEMORIAL FOUNDATION, INC.

**Current Principal Place of Business:**

26 SOUTHWEST 5TH AVENUE  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

26 SOUTHWEST 5TH AVENUE  
DELRAY BEACH, FL 33444

**New Mailing Address:**

**FEI Number:** 65-0591095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEDRICK D. STRAGHN  
26 SW 5TH AV  
THE STRAGHN BUILDING  
DELRAY BEACH, FL 33444 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  
**Name:** STRAGHN, ALFRED  
**Address:** 26 SOUTHWEST 5TH AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444

**Title:** VD  
**Name:** STRAGHN, RANDY  
**Address:** 26 SOUTHWEST 5TH AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444

**Title:** VD  
**Name:** STRAGHN, LOIS  
**Address:** 26 SOUTHWEST 5TH AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444

**Title:** TD  
**Name:** STRAGHN, DEDRICK  
**Address:** 26 SOUTHWEST 5TH AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444

**Title:** SD  
**Name:** HARRELL, ANNETTE B  
**Address:** 26 SOUTHWEST 5TH AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444

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:** ANNETTE B HARRELL

SD

04/27/2011

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

\_\_\_\_\_  
Date