

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000829

FILED
Jan 24, 2009
Secretary of State

Entity Name: MALIVAI WASHINGTON KIDS FOUNDATION, INC.

Current Principal Place of Business:

1096 W 6TH ST.
JACKSONVILLE, FL 32209

New Principal Place of Business:

1096 W 6TH STREET
JACKSONVILLE, FL 32209

Current Mailing Address:

1096 W 6TH ST.
JACKSONVILLE, FL 32209

New Mailing Address:

1096 W 6TH STREET
JACKSONVILLE, FL 32209

FEI Number: 59-3559150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORIO, TERRI
3699 SANCTUARY WAY SOUTH
JACKSONVILLE BEACH, FL 32250 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: EOED () Delete
Name: FLORIO, TERRI
Address: 3699 SANCTUARY WAY SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: F () Delete
Name: WASHINGTON, MALIVAI
Address: 5 SOUTH ROSCOE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: P () Delete
Name: DUBOW, MICHAEL
Address: 7016 GAINES CT.
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP () Delete
Name: HOGAN, PAT
Address: 913 SORRENTO ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: DT () Delete
Name: PHILLIPS, DAVE
Address: 1654 PINECREST DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: D (X) Delete
Name: BERZSENYI, ERIC
Address: 24 E. 4TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: OLIVER, MARSHA
Address: IONIC AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP (X) Change () Addition
Name: WARE, DABNEY
Address: ONE INDEPENDENT DR, SUITE 1300
City-St-Zip: JACKSONVILLE, FL 32202

Title: T (X) Change () Addition
Name: ANDERSON, DOUG
Address: 9700 PHILIPS HIGHWAY SUITE 101
City-St-Zip: JACKSONVILLE, FL 32256

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: TERRI FLORIO

EOED

01/24/2009

Electronic Signature of Signing Officer or Director

Date