

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002916

FILED
Mar 24, 2009
Secretary of State

Entity Name: BERNARD F. AND MARY ANN POWELL FOUNDATION, INC.

Current Principal Place of Business:

1700 GULF BLVD.
BELLEAIR SHORES, FL 33786

New Principal Place of Business:

2840 WEST BAY DRIVE
SUITE 109
BELLEAIR BLUFFS, FL 33770

Current Mailing Address:

1700 GULF BLVD.
BELLEAIR SHORES, FL 33786

New Mailing Address:

2840 WEST BAY DRIVE
SUITE 109
BELLEAIR BLUFFS, FL 33770

FEI Number: 59-3575091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, BERNARD F
1700 GULF BLVD.
BELLEAIR SHORES, FL 33786 US

Name and Address of New Registered Agent:

ARCHANGELI, MATTHEW C DIR
2840 WEST BAY DRIVE
SUITE 109
BELLEAIR BLUFFS, FL 33770 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: MATTHEW ARCHANGELI

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD (X) Delete
Name: POWELL, BERNARD
Address: 1700 GULF BLVD.
City-St-Zip: BELLEAIR SHORES, FL 33786

Title: D (X) Delete
Name: POWELL, MARY ANN
Address: 1700 GULF BLVD.
City-St-Zip: BELLEAIR SHORES, FL 33786

Title: D () Delete
Name: ARCHANGELI, MATTHEW C
Address: 3671 AVOCADO DR
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: STRONG, KATHLEEN
Address: 101 PONCE DE LEON BLVD
City-St-Zip: BELLEAIR, FL 33756

Title: D () Delete
Name: ARCHANGELI, ELIZABETH
Address: 1700 GULF BLVD
City-St-Zip: BELLEAIR SHORE, FL 33786

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: ARCHANGELI, MATTHEW C
Address: 2840 WEST BAY DRIVE, STE 109
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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

Title: D (X) Change () Addition
Name: ARCHANGELI, ELIZABETH
Address: 2840 WEST BAY DRIVE, STE 109
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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: MATTHEW ARCHANGELI

RA

03/24/2009

Electronic Signature of Signing Officer or Director

Date