2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003750

FILED Jan 11, 2009 Secretary of State

Entity Name: DIRK DESANZO CHARITABLE FOUNDATION, INC. **New Principal Place of Business: Current Principal Place of Business:** 1749 PERSIMMON COURT NAPLES, FL 34109 **Current Mailing Address: New Mailing Address:** 1749 PERSIMMON COURT NAPLES, FL 34109 FEI Number: 59-3587359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DESANZO, CHRISTINE M 1749 PERSIMMON CT NAPLES, FL 34109 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DESANZO, CHRISTINE M Name: Name: Address: 1749 PERSIMMON COURT Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: Title: () Delete Title: () Change () Addition DESANZO, FRANK W Name: Name: Address: 85529 BOSTICK WOOD DR Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: Title: () Delete Title: () Change () Addition DESANZO, TIMOTHY E Name: Name: Address: 842 ELIZA CT Address: City-St-Zip: BRUNSWICK, OH 44212 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: CHRISTINE DESANZO P 01/11/2009