

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004551

FILED
Mar 25, 2009
Secretary of State

Entity Name: NUZZO FAMILY FOUNDATION, INC.

Current Principal Place of Business:

570 OCEAN DRIVE
APT 1101
JUNO BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

570 OCEAN DRIVE
APT 1101
JUNO BEACH, FL 33408

New Mailing Address:

FEI Number: 22-3700343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: DCB () Delete
Name: NUZZO, SALVATORE J
Address: 570 OCEAN DRIVE APT 1101
City-St-Zip: JUNO BEACH, FL 33408

Title: DP () Delete
Name: NUZZO, LUCILLE
Address: 570 OCEAN DRIVE APT 1101
City-St-Zip: JUNO BEACH, FL 33408

Title: DVP () Delete
Name: NUZZO, JAMES L
Address: 361 COMMONWEALTH AVE.
City-St-Zip: CHESTNUT HILL, MA 02467

Title: DVP () Delete
Name: NUZZO, DAVID R
Address: 904 CLINTON ST
City-St-Zip: PHILADELPHIA, PA 19107

Title: DVP () Delete
Name: NUZZO, THOMAS S
Address: 409 LONDONDERRY RD.
City-St-Zip: LUMBERTON, NC 28358

Title: DVP () Delete
Name: NUZZO, DANA
Address: 17 WATERING LANE
City-St-Zip: NORWALK, CT 06850

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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: SALVATORE J. NUZZO

DCB

03/25/2009

Electronic Signature of Signing Officer or Director

Date