


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N99000007262	
1. Entity Name FREE FAMILY FOUNDATION CORP.	

Principal Place of Business 435 COUNTRY CLUB ROAD BELLEAIR, FL 33756	Mailing Address POST OFFICE 2036 CLEARWATER, FL 33757-2036
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03082006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3611945	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**FREE, HARRY J
435 COUNTRY CLUB ROAD
BELLEAIR, FL 33756**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

100000465891

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FREE, HARRY J 435 COUNTRY CLUB ROAD BELLEAIR, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FREE, CAROLE J 435 COUNTRY CLUB ROAD BELLEAIR, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREE, THOMAS 3086 OAKBROOK CIRCLE CLEARWATER, FL 33759
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HANLON, DIANE E 15442 WHISPERING WILLOW DRIVE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FREE, DOUGLAS J 600 HUDSON STREET, APT. 3C HOBOKEN, NJ 07030
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Harry J. Free* **Harry J. Free** **3/8/06 (727) 584-1605**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #