

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007302

FILED
Feb 15, 2010
Secretary of State

Entity Name: CNL CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

450 S ORANGE AVENUE
ORLANDO, FL 328013336

New Principal Place of Business:

Current Mailing Address:

P O BOX 4920
ORLANDO, FL 328024920

New Mailing Address:

FEI Number: 59-3613312

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANOR, TIMOTHY J
215 N. EOLA DR.
ORLANDO, FL 32802 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: DC
Name: SENEFF, JAMES M JR
Address: 1300 SUMMERLAND AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: DVC
Name: BOURNE, ROBERT A
Address: 1411 VIA TUSCANY
City-St-Zip: WINTER PARK, FL 32789

Title: DP
Name: SENEFF, TIMOTHY J
Address: 1220 WILKINSON ST.
City-St-Zip: ORLANDO, FL 32803

Title: T
Name: SCHMIDT, TRACY G
Address: 450 S. ORANGE AVE
City-St-Zip: ORLANDO, FL 32801

Title: D
Name: MANOR, TIMOTHY J
Address: 215 N. EOLA DR.
City-St-Zip: ORLANDO, FL 32802

Title: S
Name: SCIMECA, MARK D
Address: 450 S. ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

I hereby 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 all other like empowered.

SIGNATURE: MARK D. SCIMECA

S

02/15/2010

Electronic Signature of Signing Officer or Director

Date