

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007555

FILED
Apr 28, 2007
Secretary of State

Entity Name: THE S.C. BATTAGLIA FAMILY FOUNDATION, INC.

Current Principal Place of Business:

250 SOUTH PARK AVENUE
SUITE 630
WINTER PARK, FL 32789

New Principal Place of Business:

250 PARK AVENUE SOUTH
SUITE 630
WINTER PARK, FL 32789

Current Mailing Address:

P.O. BOX 3010
WINTER PARK, FL 327903010

New Mailing Address:

FEI Number: 59-3614335

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATTAGLIA, W.P.
250 SOUTH PARK AVENUE
SUITE 630
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

BATTAGLIA, W.P.
250 PARK AVENUE SOUTH
SUITE 630
WINTER PARK, FL 32789 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:

04/28/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BATTAGLIA, W.P.
Address: P.O. BOX 3010
City-St-Zip: WINTER PARK, FL 32790

Title: STD () Delete
Name: BATTAGLIA, R.E.
Address: P.O. BOX 3010
City-St-Zip: WINTER PARK, FL 32790

Title: ASD () Delete
Name: BUTTS, ANSLEY B
Address: P.O. BOX 3010
City-St-Zip: WINTER PARK, FL 32790

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BATTAGLIA, W.P.
Address: P.O. BOX 3010
City-St-Zip: WINTER PARK, FL 32790

Title: VPSD (X) Change () Addition
Name: BATTAGLIA, R.E.
Address: P.O. BOX 3010
City-St-Zip: WINTER PARK, FL 32790

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: W. P. BATTAGLIA

PRES

04/28/2007

Electronic Signature of Signing Officer or Director

Date