2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000111603

Entity Name: TJW.S FOUNDATION INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
5522 PINTO WAY ORLANDO, FL 32810								
Current Mailing Address:				New Mailing Address:				
5522 PINTO WAY ORLANDO, FL 32810								
FEI Number: 35-2236140 FEI Number Applied For () FEI Number				mber Not Applicable () Certificate of Status Desired ()				
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:				
BROWN, ANGELINA T 5522 PINTO WAY ORLANDO, FL 32810 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:								
Electronic Signature of Registered Agent					Date			
Election Campaign Financing Trust Fund Contribution ().								
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	DCEO () BROWN, ANGE 5522 PINTO W ORLANDO, FL	ΑΥ		Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BROWN, MARS 5522 PINTO WA ORLANDO, FL	ΑΥ		Title: Name: Address: City-St-Zip:	(() Change() Addition	
Title: Name: Address: City-St-Zip:	S () HALL, LATOSH. 6595 KREDT D ORLANDO, FL	RIVE		Title: Name: Address: City-St-Zip:	(()Change() Addition	
Title: Name: Address: City-St-Zip:	D () GREGORY, TH 2725 ALCLOEE OCOEE, FL 34	:		Title: Name: Address: City-St-Zip:	(()Change() Addition	
Title: Name: Address: City-St-Zip:	D () WEBB, DEBBIE 1567 FORT SM DELTONA, FL			Title: Name: Address: City-St-Zip:	O (WEBB, TON) 1110 ORANG SANFORD, F	GE AVE) Addition	
Title: Name: Address: City-St-Zip:	D () WEBB, TONY A 1567 FORT SM DELTONA, FL			Title: Name: Address: City-St-Zip:	O (BROWN, VAL 5522 PINTO ORL, FL 328	WAY) Addition	
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 607, Florida Statutes; and that my name appears								

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARSHALL L. BROWN D 04/24/2009