2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# P08000006546

Entity Name: FUNDRAISING FOR A CAUSE, INC.

Current Principal Place of Business:

3207 W. TACON STREET
TAMPA, FL 33629 US

New Principal Place of Business:

5688 W. CRENSHAW ST
SUITE 100
TAMPA, FL 33634 US

Current Mailing Address:

3207 W. TACON STREET
TAMPA, FL 33629 US

New Mailing Address:

6459 MCCORMICK LANE
HARRISBURG, PA 17111 US

FEI Number: 26-1714743 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONROY, KAREN
3207 W. TACON STREET
TAMPA, FL 33629 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: CONROY, KAREN
Address: 3207 W. TACON STREET
City-St-Zip: TAMPA, FL 33629 US

Title: TRES ( ) Delete
Name: CONROY, KAREN
Address: 3207 W. TACON STREET
City-St-Zip: TAMPA, FL 33629 US

Title: SECT ( ) Delete
Name: CONROY, KAREN
Address: 3207 W. TACON STREET
City-St-Zip: TAMPA, FL 33629 US

Title: DIR ( ) Delete
Name: CONROY, KAREN
Address: 3207 W. TACON STREET
City-St-Zip: TAMPA, FL 33629 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TRES (X) Change ( ) Addition
Name: JOHNSTON, KATHLEEN
Address: 6459 MCCORMICK LANE
City-St-Zip: HARRISBURG, PA 17111 US

Title: ( ) Change ( ) Addition
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN M. JOHNSTON TRES 01/23/2009

Electronic Signature of Signing Officer or Director Date