2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21484

FILED Jaņ 06, 2<u>01</u>1 Secretary of State

Entity Name: WILLIAM AND ELINOR LOCKETZ FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4790 ASTON GARDENS WAY, APT 209 4780 ASTON GARDENS WAY. NAPLES, FL 341093568 US

113

NAPLES, FL 341093568 US

Current Mailing Address: New Mailing Address:

4790 ASTON GARDENS WAY, APT 209 4780 ASTON GARDENS WAY, NAPLES, FL 341093568 US

NAPLES, FL 341093568 US

FEI Number: 39-1323050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOCKETZ, WILLIAM LOCKETZ, WILLIAM 2008 TARPON BAY DRIVE 4780 ASTON GARDEN WAY NORTH UNIT 101 NAPLES, FL 34119 US NAPLES, FL 34119 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: 01/06/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

LOCKETZ, WILLIAM Name:

Address: 4780 ASTON GARDENS WAY, APT 113

City-St-Zip: NAPLES, FL 341093568 US

Title:

Name: LOCKETZ, ELINOR

Address: 4780 ASTON GARDENS WAY, APT 113

City-St-Zip: NAPLES, FL 341093568 US

Title: STD

LOCKETZ, IRVING JAMES Name: Address: 727 SCARLET OAK COURT

City-St-Zip: MONROE, MI

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: ELENOR LOCKETZ **VPD** 01/06/2011