

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03947

FILED
Apr 04, 2009
Secretary of State

Entity Name: EARTH FOUNDATION INC.

Current Principal Place of Business:

3412 CLARK RD.
113
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

3412 CLARK RD.
113
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 59-2972760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMS, LAURIE B
2815 PROCTOR RD
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

SAMS, LAURIE B
3859 BEE RIDGE ROAD
202
SARASOTA, FL 34233 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: _____ Date: 04/04/2009
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: EVD () Delete
Name: WADE, MICHAEL
Address: 448 PARK TRACE BLVD.
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: WADE, EDWARD
Address: 4110 GARY ST. W
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: WAY, TIMOTHY
Address: 1007 RIVER DR.
City-St-Zip: RUSKIN, FL 33570

Title: D () Delete
Name: BONANNO, SHARON
Address: 448 PARK TRACE BLVD.
City-St-Zip: OSPRAY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL WADE EVD 04/04/2009
Electronic Signature of Signing Officer or Director Date