

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006730

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: THE 6 M COMPANY FOUNDATION, INC.

## Current Principal Place of Business:

6266 WHISPERING WAY  
ORLANDO, FL 32807

## New Principal Place of Business:

3159 HARLSTONE DRIVE  
DULUTH, GA 30096

## Current Mailing Address:

6266 WHISPERING WAY  
ORLANDO, FL 32807

## New Mailing Address:

3159 HARLSTONE DRIVE  
DULUTH, GA 30096

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALL, BEN  
6266 WHISPERING WAY  
ORLANDO, FL 32807 US

## Name and Address of New Registered Agent:

MORALL, WENDELYN R  
3159 HARLSTONE DRIVE  
DULUTH, FL 30096 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: WENDELYN MORALL

04/24/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: COB ( ) Delete  
Name: MORALL, BEN JR  
Address: 6266 WHISPERING WAY  
City-St-Zip: ORLANDO, FL 32807

Title: P ( ) Delete  
Name: MORALL, DENIYA L  
Address: 6266 WHISPERING WAY  
City-St-Zip: ORLANDO, FL 32807

Title: T ( ) Delete  
Name: MORALL, DORIS S  
Address: 6266 WHISPERING WAY  
City-St-Zip: ORLANDO, FL 32807

Title: S ( ) Delete  
Name: MORALL, BEN III  
Address: 6266 WHISPERING WAY  
City-St-Zip: ORLANDO, FL 32807

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MORALL, DORIS S  
Address: 3159 HARLSTONE DRIVE  
City-St-Zip: DULUTH, GA 30096

Title: V (X) Change ( ) Addition  
Name: MORALL, DENIYA L  
Address: 6266 WHISPERING WAY  
City-St-Zip: ORLANDO, FL 32807

Title: S (X) Change ( ) Addition  
Name: MORALL, WENDELYN R  
Address: 3159 HARLSTONE DRIVE  
City-St-Zip: DULUTH, GA 30096

Title: T (X) Change ( ) Addition  
Name: MORALL, BEN III  
Address: 3159 HARLSTONE DRIVE  
City-St-Zip: DULUTH, GA 30096

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: DORIS S MORALL

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date