

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010154

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: THE JOHNNY DAMON FOUNDATION, INC.

**Current Principal Place of Business:**

1204 SUNCAST LANE  
SUITE 2  
EL DORADO HILLS, CA 95762 US

**New Principal Place of Business:**

**Current Mailing Address:**

1204 SUNCAST LANE  
SUITE 2  
EL DORADO HILLS, CA 95762 US

**New Mailing Address:**

FEI Number: 20-5627102      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PALMA, ANTHONY W  
390 NORTH ORANGE AVENUE  
SUITE 1400  
ORLANDO, FL 32801 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DAMON, JOHNNY D MR.  
Address: 1204 SUNCAST LANE, SUITE 2  
City-St-Zip: EL DORADO HILLS, CA 95762 US

Title: D ( ) Delete  
Name: MANGAN-DAMON, MICHELLE R MS.  
Address: 1204 SUNCAST LANE, SUITE 2  
City-St-Zip: EL DORADO HILLS, CA 95762

Title: D ( ) Delete  
Name: RINGER, BILL D MR.  
Address: 1401 NORTH HUNTER STREET  
City-St-Zip: STOCKTON, CA 95202

Title: D ( ) Delete  
Name: CZYZEWSKI, ARDEN MR.  
Address: 1204 SUNCAST LANE, SUITE 2  
City-St-Zip: EL DORADO HILLS, CA 97562

**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: JOHNNY DAMON

D

04/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date