2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

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May 03, 2006 8:00 am Secretary of State **DOCUMENT #753764** 05-03-2006 90221 028 ****61.25 THE CHI CHI RODRIGUEZ, YOUTH FOUNDATION, INC. Principal Place of Business Mailing Address 3030 N. MCMULLEN BOOTH ROAD 3030 N. MCMULLEN BOOTH ROAD CLEARWATER, FL 33761 CLEARWATER, FL 33761 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05012006 Chq-NP CR2E037 (4/06) City & State City & State 4. FEI Number Applied For 59-2017124 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GREGORY, J DOUGLAS Jefferson Henderson Street Address (P.O. Box Number is Not Acceptable) 3030 MCMULLEN BOOTH ROAD CLEARWATER, FL 33761 3030 N. McMullen Booth Road Zip Code 33761 Clearwater 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE 05/01/06 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by September 6, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME JAMES, THOMAS A NAME 3030 MCMULLEN BOOTH ROAD STREET ADDRESS STREET ADDRESS CLEARWATER, FL 33761 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change Addition RODRIGUEZ, CHI CHI NAME NAME STREET ADDRESS 3030 MCMULLEN BOOTH ROAD STREET ADDRESS CLEARWATER, FL 33761 CITY-ST-7iP CITY-ST-ZIP TITLE Delete ☐ Change Addition GREGORY, DOUGLAS NAME Jefferson Henderson 3030 MCMULLEN BOOTH ROAD N STREET ADDRESS STREET ADDRESS 3030 N. McMullen Booth Road Clearwater, FL 33761 CITY-ST-ZIP CLEARWATER, FL 33761 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered endusm Jefferson Henderson

FILED

05/01/06