

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764059

FILED
Feb 15, 2006
Secretary of State

Entity Name: THE CURTIS AND EDITH MUNSON FOUNDATION, INCORPORATED

Current Principal Place of Business:

180 GOMEZ ROAD
HOBE SOUND, FL 33455 US

New Principal Place of Business:

Current Mailing Address:

1990 M STREET NW
SUITE 250
WASHINGTON, DC 20036 US

New Mailing Address:

FEI Number: 59-2235907 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENRY, C. WOLCOTT, III
180 GOMEZ ROAD
HOBE SOUND, FL 33455 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: PD () Delete
Name: WOLCOTT, HENRY C. III
Address: 1900 M STREET NW, STE 250
City-St-Zip: WASHINGTON, DC

Title: D () Delete
Name: HOBBS, TRUMAN M JR
Address: 1900 M STREET NW, STE 250
City-St-Zip: WASHINGTON, DC 20007

Title: DS () Delete
Name: REID, BRUCE S.,
Address: 3541 THOMAS
City-St-Zip: MONTGOMERY, AL

Title: DT () Delete
Name: HENRY, H. ALEXANDER,
Address: 105 BASSETT CREEK TR
City-St-Zip: HOBE SOUND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WOLCOTT, HENRY C. III
Address: 1990 M STREET NW, STE 250
City-St-Zip: WASHINGTON, DC 20036

Title: D (X) Change () Addition
Name: HOBBS, TRUMAN M JR
Address: 3180 THOMAS AVE
City-St-Zip: MONTGOMERY, AL 36106

Title: DS (X) Change () Addition
Name: REID, BRUCE S.,
Address: 3245 THOMAS AVE
City-St-Zip: MONTGOMERY, AL 36106

Title: DT (X) Change () Addition
Name: HENRY, H. ALEXANDER,
Address: 11610 AIR VIEW LANE
City-St-Zip: GREAT FALLS, VA 22066

I hereby certify that the information supplied with this filing does not qualify for the 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: C. WOLCOTT HENRY, III

PD

02/15/2006

Electronic Signature of Signing Officer or Director

Date