2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007
Secretary of State

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Entity Name: KARPELES MANUSCRIPT LIBRARY INCORPORATED

Current Principal Place of Business:

101 WEST 1ST STREET
JACKSONVILLE, FL 322064929

New Principal Place of Business:

Current Mailing Address:

465 HOT SPRINGS RD.
SANTA BARBARA, CA 93108 US

New Mailing Address:

FEI Number: 59-3132767 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RUTHERFORD, JENNIFER
101 WEST 1ST STREET
JACKSONVILLE, FL 32206 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:	CEO	( ) Delete
Name:	KARPELES, DAVID DR.	
Address:	465 HOT SPRINGS ROAD	
City-St-Zip:	SANTA BARBARA, CA 93108 US	
Title:	CFO	( ) Delete
Name:	KARPELES, MARSHA MRS.	
Address:	465 HOT SPRINGS ROAD	
City-St-Zip:	SANTA BARBARA, CA 93108 US	
Title:	D	( ) Delete
Name:	RUTHERFORD, JENNIFER MRS.	
Address:	P.O. BOX 1021	
City-St-Zip:	PORT ORCHARD, WA 98336 US	
Title:	D	( ) Delete
Name:	KARPELES, ELLIOTT DR.	
Address:	603 W. ISLAY	
City-St-Zip:	SANTA BARBARA, CA 93103 US	
Title:	D	( ) Delete
Name:	CARR, ERIC	
Address:	C/O 465 HOT SPRINFGS RD.	
City-St-Zip:	SANTA BRABARA, CA 93108 US	
Title:	DIR	( ) Delete
Name:	MINOR, RICHARD	
Address:	101 W. 1ST. ST.	
City-St-Zip:	JACKSONVILLE, FL 32206 US	

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:	
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 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: JENNIFER RUTHERFORD D 01/22/2007

Electronic Signature of Signing Officer or Director — Date