2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

DOCUMENT # F9800001552

Feb 09, 2006 08:00 AM Secretary of State 1. Entity Name BARKETT FAMILY FOUNDATION, INC. Mailing Address Principal Place of Business 5580 PETERSON LANE, SUITE 250, LB 10 DALLAS TX 75240 5580 PETERSON LANE, SUITE 250, LB 10 DALLAS TX 75240 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc Suite. Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State 4. FEI Number City & State 58-2372150 Not Applicable Country \$8.75 Additional Ζφ Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BARKETT, GEORGE A DR 2606 PALOMA DR. Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32960 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution Florida Department of State Due By May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition TITLE ☐ Change ☐ Delete TITLE BARKETT, GEORGE A DR NAME NAME 2606 PALOMA DR. STREET AUDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-SI-ZIP CITY - ST - ZIF Change Addition ☐ Delete TITLE TITLE U00000427485 02/21/06-\$0007-022 61.25 BARKETT, SUE T NAME NAME 2606 PALOMA DR. STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY - ST - ZIP Change ☐ Addition Delete TITLE TITLE NAME BARKETT, ANDREA T 551 WALL STREET STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP VERO BEACH FL 32960 □ Change Addition TITLE ☐ Delete TITLE BARKETT, G. D. NAME STREET ADDRESS 1696 MONARCH RIDGE CIRCLE STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP EL CAJON CA 92109 Addition Delete Change TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY - ST - ZIP TITLE ☐ Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY - ST - ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemented 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 tostee 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.

2-1-06

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