2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2006
Secretary of State

DOCUMENT# N00000006469

Entity Name: GILL FAMILY FOUNDATION, INC.

Current Principal Place of Business:

253 CANTEN AVE E
WINTER PARK, FL 32789

New Principal Place of Business:

253 CANTON AVE E
WINTER PARK, FL 32789

Current Mailing Address:

253 CANTEN AVE E
WINTER PARK, FL 32789

New Mailing Address:

253 CANTON AVE E
WINTER PARK, FL 32789

FEI Number: 59-3677871 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HEEKIN, JAMES F
215 N EOLA DR
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: GILL, ROBERT E
Address: 253 CANTON AVE E
City-St-Zip: WINTER PARK, FL 32789

Title: DST ( ) Delete
Name: GILL, VIRGINIA G
Address: 253 CANTON AVE E
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete
Name: GILL, JEFFREY T
Address: 9800 US HWY 42
City-St-Zip: PROSPECT, KY 40059

Title: D ( ) Delete
Name: GILL, PATRICIA G
Address: 9800 US HWY 42
City-St-Zip: PROSPECT, KY 40059

Title: DP ( ) Delete
Name: GILL, R. SCOTT
Address: 161 E CHICAGO AVENUE, #32DE
City-St-Zip: CHICAGO, IL 60611

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:

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: ROBERT E. GILL D 07/14/2006
Electronic Signature of Signing Officer or Director — Date