2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007531

FILED Jan 18, 2006 Secretary of State

Entity Name: KILLEARN KIWANIS CHARITIES, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

3485 HYDE PARK WAY 3805 LEANE DRIVE

TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309

Current Mailing Address: New Mailing Address:

3485 HYDE PARK WAY 3805 LEANE DRIVE

TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309

FEI Number: 59-3683882 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOOPER, HARRY L

3485 HYDE PARK WAY

BARGER, JR., STEPHEN J

3805 LEANE DRIVE

TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 US

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: STEPHEN J. BARGER, JR. 01/18/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: HOOPER, HARRY L Name: BARGER, JR, STEPHEN J

Address: 3485 HYDE PARK WAY Address: 3805 LEANE DRIVE
City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32309

 Name:
 JACKSON, ALAN
 Name:
 DOWNING, PAUL

 Address:
 1524 OLDFIELD DRIVE
 Address:
 2035 DUNEAGLE LANE

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:
 TALLAHASSEE, FL 32317

Title: D () Delete Title: () Change () Addition

 Name:
 ROBBINS, JOHN
 Name:

 Address:
 3080 WHITE IBIS WAY
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 DOYAL, FRANCIS M
 Name:

 Address:
 6152 PIMLICO CT
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309
 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: STEPHEN J. BARGER, JR. D/RA 01/18/2006

Electronic Signature of Signing Officer or Director

Date