2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2006
Secretary of State

DOCUMENT# N01000006443

Entity Name: HILTON FAMILY FOUNDATION, INC.

Current Principal Place of Business:

4116 HWY 231 N
PANAMA CITY, FL 32404

New Principal Place of Business:

Current Mailing Address:

PO BOX 59462
PANAMA CITY, FL 324120462

New Mailing Address:

FEI Number: 59-3748610 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILTON, L. CHARLES JR
4116 HWY 231 N
PANAMA CITY, FL 32404 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:	DP	( ) Delete
Name:	HILTON, L. CHARLES JR	
Address:	4116 HWY 231 N	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:	DST	( ) Delete
Name:	HILTON, LELA	
Address:	11127 FRONT BEACH RD	
City-St-Zip:	PANAMA CITY BEACH, FL 32407	
Title:	DVP	( ) Delete
Name:	HILTON, JULIE K	
Address:	11127 FRONT BEACH RD	
City-St-Zip:	PANAMA CITY BEACH, FL 32407	
Title:	DAT	( ) Delete
Name:	HUMBLE, ROBERT NIXON	
Address:	4116 HWY 231 N	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:	D	( ) Delete
Name:	KHAN, CODY	
Address:	11127 FRONT BEACH RD	
City-St-Zip:	PANAMA CITY BEACH, FL 32407	
Title:	DVP	( ) Delete
Name:	KOLK, JACALYN N	
Address:	4116 HWY 231 N.	
City-St-Zip:	PANAMA CITY, FL 32404	

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: L. CHARLES HILTON, JR. DP 01/18/2006

Electronic Signature of Signing Officer or Director — Date