

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010964

FILED
Jan 31, 2005
Secretary of State

Entity Name: KAITY'S HOUSE CHARITIES, INC.

Current Principal Place of Business:

2412 MARZEL AVE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560097
ORLANDO, FL 328560097

New Mailing Address:

FEI Number: 20-0533533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUFFY, JIM
2412 MARZEL AVE
ORLANDO, FL 32806 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: T () Delete
Name: DUFFY, JIM
Address: 2412 MARZEL AVE
City-St-Zip: ORLANDO, FL 32806

Title: T () Delete
Name: DUFFY, JODY
Address: 2412 MARZEL AVE
City-St-Zip: ORLANDO, FL 32806

Title: T () Delete
Name: GARNEAU, LYN
Address: 4305 LAKE MARGARET DR
City-St-Zip: ORLANDO, FL 32812

Title: T () Delete
Name: STOUT, TARA
Address: 2694 MASTERPEICE RD
City-St-Zip: LAKE WALES, FL 33898

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JIM DUFFY

T

01/31/2005

Electronic Signature of Signing Officer or Director

Date