2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Sep 05, 2006 8:00 am Secretary of State 09-05-2006 90026 034 ****61.25

DOCL	IMEN	1T #	N04	00000	1647



1. Entity Name INGA ELLZEY CHIS FOUNDATION, INC.									
Principal Place of Business 1211 SEMORAN BLVD, STE 171 CASSELBERRY, FL 32707-64 42		121	Mailing Address 1211 SEMORAN BLVD, STE 171 CASSELBERRY, FL 32707-64 42		60038467				
	lace of Business		ailing Address	000					
125 DXFDRD RDAD Suite, Apt. #, etc.			125 OXFORD ROAD Suite, Apt. #, etc.		07052006 Chg-NP CR2E037 (4/06)				
City & State CASSELBELLY, FL			CASSELBERRY, FL			4. FEI Number 59-3790159	0159 No		
^{Zip} 3 273	0-211 US		7ip 32730-2111 red Agent	Country	5	Certificate of Status Name and Addres		8.75 Addi ee Required ent	
DUIL LIDDI	•			Nал	ne			,	
PHILLIPPI, WILLIAM C B & C CORPORATE SERVICES, INC. 201 S BISCAYNE BLVD, STE 3000 MIAMI, FL 33131			Stre	Street Address (P.O. Box Number is Not Acceptable)					
•	-:			City	<i>!</i>		FL	Zip Code)
	named entity submits this ions of registered agent.	statement for the pur	rpose of changing its	registered offic	ce or register	red agent, or both, in the		I miliar with, a	and accept
SIGNATURE .	Signature, typed or printed name of	registered agent and title if a	pplicable. (NOTI	E: Registered Agent s	signature required	d when reinstating)	DATE		
Filing Fee is \$61.25 Due by September 6, 2006 9. Election Campaign F Trust Fund Contribut									
Di	_				ing	\$5.00 May Be Added to Fees	Make check Florida Departn		r
10.	ue by September 6,		Trust Fund (Contribution.		\$5.00 May Be Added to Fees	Florida Departn	nent of Sta	ate 10
	ue by September 6,	, 2006 ERS AND DIRECTOR C D, STE 171	Trust Fund (Contribution.	RESS 12	Added to Fees	Florida Departm TO OFFICERS AND DIRE	nent of St	ate
10. TITLE NAME STREET ADDRESS	OFFICE D ELLZEY, INGEBORG 1211 SEMORAN BLV	, 2006 ERS AND DIRECTOR C D, STE 171	Trust Fund (11. TITLE NAME STREET ADDR	RESS 12	Added to Fees ADDITIONS/CHANGES 25 DXFORD ROA	Florida Departm TO OFFICERS AND DIRE D 32730211	nent of Sta	ate 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELLZEY, INGEBORG 1211 SEMORAN BLV CASSELBERRY, FL	. 2006 ERS AND DIRECTOR C D, STE 171 327076442	Trust Fund (11. TITLE NAME STREET ADDR	RESS 12	Added to Fees ADDITIONS/CHANGES 25 DXFORD ROA	Florida Departing TO OFFICERS AND DIRECTOR O	CTORS IN	ate 10 Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	D ELLZEY, INGEBORG 1211 SEMORAN BLV CASSELBERRY, FL D ELLZEY, KARL M 1211 SEMORAN BLV CASSELBERRY, FL D ELLZEY, KARL M 1211 SEMORAN BLV CASSELBERRY, FL D KRIER-MORROW, DI	2006 ERS AND DIRECTOR C D, STE 171 327076442 D, STE 171 327076442 ANE D, STE 171	Trust Fund (11. TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	RESS 12 C	Added to Fees ADDITIONS/CHANGES 25 OXFORD ROA ASSELBERRY, FL 25 OXFORD ROA	Florida Departm TO OFFICERS AND DIRE D 327302111	nent of Sta ECTORS IN Change	10 Addition
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indicated on this report or supplied with the information indicated on this report or suppliemental report in true and acceptate and that my agnature 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 expowered 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 employer.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-/ 2-06 Daytime Phone #