

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001820

FILED
Jan 30, 2007
Secretary of State

Entity Name: KNOWLEDGE KEEPERS OUTREACH, INC.

Current Principal Place of Business:

8094 INDIAN CREEK BLVD
KISSIMMEE, FL 34747

New Principal Place of Business:

Current Mailing Address:

8094 INDIAN CREEK BLVD
KISSIMMEE, FL 34747

New Mailing Address:

FEI Number: 59-3831353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIM, HERBERT
8094 INDIAN CREEK BLVD
KISSIMMEE, FL 34747 US

Name and Address of New Registered Agent:

JIM, HERBERT R COOWNER
8094 INDIAN CREEK BLVD
KISSIMMEE, FL 34747 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: HERBERT R. JIM

01/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HERBERT, JIM
Address: 8094 INDIAN CREEK BLVD
City-St-Zip: KISSIMMEE, FL 34747

Title: D () Delete
Name: GONZALEZ, JUDY
Address: 1319 SUSSEX DR
City-St-Zip: N LAUDERDALE, FL 34747

Title: D () Delete
Name: MICHAEL, DELORES
Address: 4969 TRADEWIND TERR
City-St-Zip: DANIA, FL 33312

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JIM, APRIL A COOWNER
Address: 8094 INDIAN CREEK BLVD
City-St-Zip: KISSIMMEE, FL 34747

Title: D (X) Change () Addition
Name: GONZALEZ, JUDY A DIR
Address: 1319 SUSSEX DR
City-St-Zip: N LAUDERDALE, FL 34747 US

Title: D (X) Change () Addition
Name: MICHAEL, DELORES DIR
Address: 9461 N. MEADOW CIRCLE
City-St-Zip: MIRAMAR, FL 33025 US

Title: D () Change (X) Addition
Name: WALDEN, NAOMI DIR
Address: 4220 56 AVE
City-St-Zip: NAPLES, FL 34120 US

Title: D () Change (X) Addition
Name: WALDEN, JASON DIR.
Address: 4220 56 AVE
City-St-Zip: NAPLES, FL 34120 US

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: APRIL A. JIM

D

01/30/2007

Electronic Signature of Signing Officer or Director

Date