## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007292

Entity Name: TWENTY PEARLS FOUNDATION, INC.

FILED May 01, 2007 Secretary of State

 5808 SW 49TH STREET
 5808 SW 49TH STREET

 GAINESVILLE, FL 32608
 GAINESVILLE, FL 32608
 US

Current Mailing Address: New Mailing Address:

PO BOX 140562 PO BOX 141392

GAINESVILLE, FL 326140562 GAINESVILLE, FL 326141392 US

FEI Number: 84-1714693 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

RAWLS, YVONNE C 5808 SW 49TH STREET GAINESVILLE, FL 32608 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: P/C (X) Change ( ) Addition

 Name:
 RAWLS, YVONNE C
 Name:
 RAWLS, YVONNE C

 Address:
 5808 SW 49TH STREET
 Address:
 5808 SW 49TH STREET

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

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

 Name:
 BANKS, LAKAY A
 Name:

 Address:
 1335 SE 11TH AVE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32641
 City-St-Zip:

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BRIDGEWATER-ALFORD, FLORIDA
 Name:

 Address:
 581 SW 33RD PL
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:

Title: DS () Delete Title: (X) Change ( ) Addition CHESTNUT, CYNTHIA M MRS. Name: HEAD-JONES, SHARLA D Name: Address: 3631 NE 156TH AVE Address: 911 NE BLVD. City-St-Zip: GAINESVILLE, FL 32609 City-St-Zip: GAINESVILLE, FL 32601

Title: TD () Delete Title: () Change () Addition

 Name:
 MARTIN, TELISHA S
 Name:

 Address:
 4425 NW 44TH PLACE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:

Title: D () Delete Title: S/D (X) Change () Addition

 Name:
 BATTS, CYNTHÍA N
 Name:
 BATTS, CYNTHÍA N

 Address:
 7824 NW 53RD WAY
 Address:
 7824 NW 53RD WAY

 City-St-Zip:
 GAINESVILLE, FL 32653
 City-St-Zip:
 GAINESVILLE, FL 32653

I hereby certify that the information supplied with this filing does not qualify 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: YVONNE C. RAWLS P/C 05/01/2007