

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009071

FILED  
Mar 18, 2011  
Secretary of State

Entity Name: BUENAVISTA KIDNEY TRANSPLANT FUND, INC.

**Current Principal Place of Business:**

124 MT. PILOT ST.  
CANTONMENT, FL 32533

**New Principal Place of Business:**

5561 SILVERBELL COURT  
PENSACOLA, FL 32526

**Current Mailing Address:**

124 MT. PILOT ST.  
CANTONMENT, FL 32533

**New Mailing Address:**

5561 SILVERBELL COURT  
PENSACOLA, FL 32526

FEI Number: 26-0894388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURROUGHS, JERROLD A SR.  
124 MT. PILOT ST  
CANTONMENT, FL 32533 US

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

BURROUGHS, JERROLD A SR.  
5561 SILVERBELL COURT  
PENSACOLA, FL 32526 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: \_\_\_\_\_

03/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BURROUGHS, JERROLD A SR.  
Address: 5561 SILVERBELL COURT  
City-St-Zip: PENSACOLA, FL 32526

Title: VP  
Name: WALLACE, SANDRA J  
Address: 34473 MAGNOLIA FARMS ROAD  
City-St-Zip: ROBERTSDALE, AL 36567

Title: T  
Name: BURROUGHS, MELBA O  
Address: 5561 SILVERBELL COURT  
City-St-Zip: PENSACOLA, FL 32526

Title: S  
Name: HUTCHINSON, MONIQUE  
Address: 7180 HWY 95A NORTH  
City-St-Zip: MOLINO, FL 32577

Title: TR  
Name: SOBIECKI, KAREN A  
Address: 1621 CONDOR DRIVE  
City-St-Zip: CANTONMENT, FL 32533

Title: TR  
Name: MARTHA, SEEP M  
Address: 7045 NICHOLSON DR.  
City-St-Zip: MOLINO, FL 32577

I hereby 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 all other like empowered.

SIGNATURE: MELBA O. BURROUGHS

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03/18/2011

Electronic Signature of Signing Officer or Director

Date