

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005004

FILED
May 27, 2009
Secretary of State

Entity Name: KAREN'S KAUSE: THE KAREN B HENDERSON PKD FOUNDATION, INC.

Current Principal Place of Business:

10814 PRESERVATION VIEW DR.
APT. 308
TAMPA, FL 33626

New Principal Place of Business:

2204 GLEN MIST DRIVE
VALRICO, FL 33594

Current Mailing Address:

10814 PRESERVATION VIEW DR.
APT. 308
TAMPA, FL 33626

New Mailing Address:

2204 GLEN MIST DRIVE
VALRICO, FL 33594

FEI Number: 43-1266906 **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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: D () Delete
Name: HENDERSON, CHARLES W III
Address: 10814 PRESERVATION VIEW DR. APT. 308
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: EBNER, CHRISTIE
Address: 10814 PRESERVATION VIEW DR. APT. 308
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: HENDERSON, CHARLES W JR.
Address: 2204 GLEN MIST DR.
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HENDERSON, CHARLES W III
Address: 4014 STORNOWAY DRIVE
City-St-Zip: LAND O' LAKES, FL 34638

Title: D (X) Change () Addition
Name: EBNER, CHRISTIE
Address: 4014 STORNOWAY DRIVE
City-St-Zip: LAND O' LAKES, FL 34638

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES W HENDERSON III

PRES

05/27/2009

Electronic Signature of Signing Officer or Director

Date