2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45225

FILED Mar 08, 2007 Secretary of State

Entity Name: KEEP WAKULLA COUNTY BEAUTIFUL, INC.

Current Principal Place of Business: P.O. BOX 700 CRAWFORDVILLE, FL 323260700		New Princ	New Principal Place of Business: 15 OAK STREET CRAWFORDVILLE, FL 32327	
Mailing Addres	ss:	New Maili	ng Address:	
(700 ORDVILLE, FL	323260700			
r: 59-3089214	FEI Number Applied For()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
d Address of (Current Registered Agent:	Name and	Address of New Registered Agent:	
PRDVILLE, FL e named entity	32327 US	ourpose of changing i	ts registered office or registered agent, or both,	
	nic Signature of Registered Age	ent	Date	
			IS/CHANGES TO OFFICERS AND DIRECTOR	
HENDERSON, 5 ALBIN DRIVE	DON E	litie: Name: Address: City-St-Zip:	() Change () Addition	
STRICKLAND, PO BOX 473/2	JOANNE 6 TOLKIEN WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
JONES, DOUG 4330 CRAWFO	RDVILLE HIGHWAY/PO BOX 525	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition JONES, DOUG 4330 CRAWFORDVILLE HIGHWAY/PO BOX 525 CRAWFORDVILLE, FL 32326	
BURGESS, BC 109 COCHISE	NNIE DRIVE	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition BURGESS, BONNIE 109 COCHISE DRIVE CRAAWFORDVILLE, FL 32327	
HANWAY, JUL 3128 CRAWFO	A DRDVILLE HWY	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition HANWAY, JULIA 3128 CRAWFORDVILLE HWY CRAWFORDVILLE, FL 32327	
D (ANDERSON, R	•	Title: Name:	() Change () Addition	
	Mailing Address 700 PRDVILLE, FL 700 PRDVILLE, FL 7: 59-3089214 d Address of C RJORIE NTRY CLUB DI PRDVILLE, FL e named entity te of Florida. RE: Electron S AND DIREC PD (HENDERSON, 5 ALBIN DRIVE CRAWFORDVI VD (STRICKLAND, PO BOX 473/2 CRAWFORDVI TD (JONES, DOUG 4330 CRAWFORDVI SD (BURGESS, BO 109 COCHISE CRAWFORDVI D (HANWAY, JUL 3128 CRAWFORDVI CRAWFORDV	Mailing Address: 700 PRDVILLE, FL 323260700 r: 59-3089214 FEI Number Applied For () d Address of Current Registered Agent: RJORIE NTRY CLUB DRIVE PRDVILLE, FL 32327 US e named entity submits this statement for the page of Florida. RE: Electronic Signature of Registered Agents SAND DIRECTORS: PD () Delete HENDERSON, DON 5 ALBIN DRIVE CRAWFORDVILLE, FL 32327 VD () Delete STRICKLAND, JOANNE PO BOX 473/26 TOLKIEN WAY CRAWFORDVILLE, FL 32326 TD () Delete JONES, DOUG 4330 CRAWFORDVILLE HIGHWAY/PO BOX 525 CRAWFORDVILLE, FL 32326 SD () Delete BURGESS, BONNIE 109 COCHISE DRIVE CRAAWFORDVILLE, FL 32327 D () Delete HANWAY, JULIA 3128 CRAWFORDVILLE, FL 32327	Mailing Address: Mailing Address: New Maili 700 PRDVILLE, FL 323260700 PRESON Address: RESPONDED ADDRIVE PRESON ADDRECTORS: PD () Delete HENDERSON, DON 5 ALBIN DRIVE CRAWFORDVILLE, FL 32327 VD () Delete STRICKLAND, JOANNE PO BOX 473/26 TOLKIEN WAY CRAWFORDVILLE, FL 32326 TID () Delete JONES, DOUG 4330 CRAWFORDVILLE HIGHWAY/PO BOX 525 CRAWFORDVILLE, FL 32327 D () Delete BURGESS, BONNIE SUBJECTION ADDRECTORS: D () Delete BURGESS, BONNIE BURGESS, BONNIE 109 COCHISE DRIVE CRAWFORDVILLE, FL 32327 D () Delete HANDERSON, DON Address: CRAWFORDVILLE, FL 32327 City-St-Zip: TD () Delete BURGESS, BONNIE BURGESS, BONNIE 109 COCHISE DRIVE CRAWFORDVILLE, FL 32327 D () Delete HANWAY, JULIA 3128 CRAWFORDVILLE, FL 32327 City-St-Zip: Title: Name: Name: Address: CRAWFORDVILLE, FL 32327 City-St-Zip: Title: Name:	

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: DOUG JONES TD 03/08/2007