## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000000993

FILED Jan 17, 2007 Secretary of State

-	e: THE JUDY BUTTS FOUNDATION, INC	D.	
Current Pri			
Current Pri			
	ncipal Place of Business:	New Principal Place of Business:	
P.O. BOX 30 PENSACOL	0590 A, FL 32503 US	1098 HARBOR LANE PENSACOLA, FL 32503 US	
Current Ma	iling Address:	New Mailing Address:	
P.O. BOX 30 PENSACOL	0590 A, FL 32503 US		
FEI Number: 5	59-3180524 FEI Number Applied For()	FEI Number Not Applicable ( ) Certificate of Status Desired ( )	
Name and A	Address of Current Registered Agent:	Name and Address of New Registered Agent:	
BUTTS, HAI P.O. BOX 30 PENSACOL		BUTTS, HANDSEL B 1098 HARBOR LANE PENSACOLA, FL 32503 US	
The above n in the State o		purpose of changing its registered office or registered agent, or bot	h,
	of Florida. É	purpose of changing its registered office or registered agent, or bot 01/17/2007	h,
in the State o	of Florida. É	01/17/2007	h, —
in the State o	of Florida. ÉE:	01/17/2007	_
in the State of SIGNATURE  OFFICERS ATTITLE: Name: Address:	of Florida.  E:  Electronic Signature of Registered Ag	01/17/2007 gent Date	_
in the State of SIGNATURE  OFFICERS ATTITLE: Name: Address: City-St-Zip: Title: Name: Address:	of Florida.  E:  Electronic Signature of Registered Ag  AND DIRECTORS:  DP () Delete  BUTTS, HANDSEL B  1098 HARBOR LANE	O1/17/2007  Jent Date  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  Title: ( ) Change ( ) Addition  Name: Address:	_
in the State of SIGNATURE  OFFICERS A	of Florida.  E:  Electronic Signature of Registered Ag  AND DIRECTORS:  DP () Delete	pent Date  ADDITIONS/CHANGES TO OFFICERS AND  Title: ( ) Change ( ) Addition	

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: HANDSEL BUTTS DP 01/17/2007