2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N94000006249

Entity Name: VIRGINIA GAYLORD NEELY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

% BRUCE BERKINSHAW
765 SEAGATE DRIVE
NAPLES, FL 34103

New Principal Place of Business:

% ROBERT CLARKE
765 SEAGATE DRIVE
NAPLES, FL 34103

Current Mailing Address:

C/O BP&S, 3325 FRENCH PARK DRIVE
SUITE 1
EDMOND, OK 73034

New Mailing Address:

FEI Number: 56-1908500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERKINSHAW, BRUCE
% U.S. TRUST COMPANY OF FLORIDA, S.B.
765 SEAGATE DR.
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CLARKE, ROBERT
% U.S. TRUST COMPANY OF FLORIDA, S.B.
765 SEAGATE DR.
NAPLES, FL 34103 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: ROBERT CLARKE 04/28/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BERGLUND, JANICE S
Address: P.O. BOX 307 (N/A)
City-St-Zip: CASHIERS, NC 28717

Title: D ( ) Delete
Name: NEELY, JACK H
Address: 401 S. BOSTON AVE., STE. 2350
City-St-Zip: TULSA, OK 74103

Title: D ( ) Delete
Name: NEELY, PAUL
Address: P.O. BOX 951 (N/A)
City-St-Zip: CHATTANOOGA, TN 37401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JANICE BERGLUND DIR 04/28/2006
Electronic Signature of Signing Officer or Director — Date