

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002908

FILED
Feb 09, 2009
Secretary of State

Entity Name: KENNETH T. AND MILDRED S. GAMMONS CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

46 N. WASHINGTON BLVD., SUITE 27
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

46 N. WASHINGTON BLVD., SUITE 27
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-0596492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWNING, GEORGE III
46 N. WASHINGTON BLVD., SUITE 27
SARASOTA, FL 34236 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: DP () Delete
Name: ENOS, RICHARD
Address: 6341 APPROACH ROAD
City-St-Zip: SARASOTA, FL 34238

Title: DSTV () Delete
Name: BROWNING, GEORGE III
Address: 46 N. WASHINGTON BLVD., SUITE 27
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: BROWNING, SALLY
Address: 5132 BACHMAN RD
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: FOERSTER, DEIDRE
Address: 13900 TWO NOTCH PLACE
City-St-Zip: MIDLOTHIAN, VA 23113

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:

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: GEORGE BROWNING III

DSTV

02/09/2009

Electronic Signature of Signing Officer or Director

Date