

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002503

FILED
May 01, 2006
Secretary of State

Entity Name: KIDS VOTING LEON COUNTY, INC.

Current Principal Place of Business:

123 S. CALHOUN STREET
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

123 S. CALHOUN STREET
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 31-1577197 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:

WADDILL, TOWNSEND
803 E GEORGIA ST
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

EVANS, TIMOTHY
443 EAST COLLEGE AVE.
TALLAHASSEE, FL 32301 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: TIMOTHY D. EVANS

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: WADDILL, TOWNSEND
Address: 808 E. GEORGIA STREET
City-St-Zip: TALLAHASSEE, FL 32308

Title: DC () Delete
Name: MORRISON, ANGELA
Address: 5608 WAGON WHEEL CIRCLE N.
City-St-Zip: TALLAHASSEE, FL 32317

Title: DS () Delete
Name: BERENTSEN, BECKY
Address: 123 S. CALHOUN ST.
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: EVANS, TIMOTHY D
Address: 443 EAST COLLEGE AVE.
City-St-Zip: TALLAHASSEE, FL 32301

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: TIMOTHY D. EVANS

DT

05/01/2006

Electronic Signature of Signing Officer or Director

Date