

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003100

FILED
Mar 07, 2007
Secretary of State

Entity Name: KIMMINS TERRIER FOUNDATION, INC.

Current Principal Place of Business:

1502 2ND AVE.
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

1502 2ND AVE.
TAMPA, FL 33605

New Mailing Address:

FEI Number: 59-3472911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAM, FRANCIS M
1501 2ND AVE
TAMPA, FL 33605 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: D () Delete
Name: WILLIAMS, FRANCIS M
Address: 1501 2ND AVE.
City-St-Zip: TAMPA, FL 33605

Title: D () Delete
Name: WILLIAMS, MARIE K
Address: 441 MOUNTAIN VIEW DR.
City-St-Zip: LEWISTON, NY 14092

Title: D () Delete
Name: WILLIAMS, HARRIS N
Address: 1501 2ND AVE.
City-St-Zip: TAMPA, FL 33605

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: FRANCIS WILLIAMS

D

03/07/2007

Electronic Signature of Signing Officer or Director

Date