

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003803

FILED
Feb 20, 2005
Secretary of State

Entity Name: KNOW THYSELF AS SOUL FOUNDATION, SOUTHEAST, INC.

Current Principal Place of Business:

16753 16TH ST.
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

16753 16TH ST.
LIVE OAK, FL 32060

New Mailing Address:

FEI Number: 58-2277205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, JANE
16753 16TH ST
LIVE OAK, FL 32060 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: BLAKE, DON
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

Title: V () Delete
Name: VON ALDENBRUCK, GYTHA
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

Title: P () Delete
Name: BENNETT, JANE
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: AUGUSTUS, GARY
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: SHAH, MUKUND
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

Title: S () Delete
Name: HATTAWAY, MELISSA
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

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:

Title: S (X) Change () Addition
Name: CALDWELL, GLYNDA
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

Title: T (X) Change () Addition
Name: HATTAWAY, MELISSA
Address: 16753 16TH ST
City-St-Zip: LIVE OAK, FL 32060

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JANE BENNETT

P

02/20/2005

Electronic Signature of Signing Officer or Director

Date