

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003803

FILED
May 22, 2003
Secretary of State

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

Current Principal Place of Business:

1538 CHANTILLY DR
#A-201
ATLANTA, GA 30324

New Principal Place of Business:

16753 16TH ST.
LIVE OAK, FL 32060

Current Mailing Address:

P.O. BOX 14848
ATLANTA, GA 30324

New Mailing Address:

16753 16TH ST.
LIVE OAK, FL 32060

FEI Number: 58-2277205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Title: V () Delete
Name: MANDODY, GYTHA
Address: 8900 S OCEAN DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: S () Delete
Name: BENNETT, JANE
Address: 2315 36TH ST WEST
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: AUGUSTUS, GARY
Address: 6217 NW 23 DR
City-St-Zip: BOCA RATON, FL 334344352

Title: T () Delete
Name: HATTAWAY, MELISSA
Address: 301 ORANGEVIEW AVE
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: T (X) Change () Addition
Name: SHAH, MUKUND
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: DON BLAKE

P

05/22/2003

Electronic Signature of Signing Officer or Director

Date