

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000830

Entity Name: RAFIKI FOUNDATION INCORPORATED**Current Principal Place of Business:**23315 CR 44A
EUSTIS, FL 32736**Current Mailing Address:**P.O. BOX 1988
EUSTIS, FL 32727 US**FEI Number: 74-2477089****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**CLEMENT, G. EDWARD ESQ
308 E FIFTH AVE
MOUNT DORA, FL 32757 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	T
Name	SHOQUIST, TOM
Address	807 EDGEFOREST TERR
City-State-Zip:	SANFORD FL 32771

Title	D
Name	JOHNSTON, MAYHOWARD
Address	5161 FALCON RIDGE RD
City-State-Zip:	ROANOKE VA 24018

Title	D
Name	JOHNSON, DENNIS
Address	2340 N INIS LANE
City-State-Zip:	ESCONDIDO CA 78232

Title	P
Name	JENSEN, ROSEMARY
Address	38435 TIMBERLANE DR
City-State-Zip:	UMATILLA FL 32784

Title	D
Name	CARLA, NORTINGTON
Address	414 CANDILLERA TRACE
City-State-Zip:	BOERNE TX 78006

Title	S
Name	CHUNN, JOHN
Address	494 S SEGUIN AVE SUITE 102
City-State-Zip:	NEW BRAUNFELS TX 78130

Title	EXECUTIVE DIRECTOR
Name	ELLIOTT, KAREN
Address	34240 WOODRIDGE LN
City-State-Zip:	EUSTIS FL 32736

I hereby 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 all other like empowered.

SIGNATURE: KAREN ELLIOTT**EXECUTIVE DIRECTOR****04/05/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date