

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 27 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 743694 (2)

1. Corporation Name

KASHI CHURCH FOUNDATION, INC.



Principal Place of Business

Mailing Address

11155 ROSELAND RD
SEBASTIAN FL 32958
US11155 ROSELAND RD
SEBASTIAN FL 32958-8153
US3. Date Incorporated or Qualified
07/24/19783a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-1850384Applied For
Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution

[]

\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

[] Yes

XX No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EVANS, JOHN G.
11155 ROSELAND ROAD
ROSELAND FL 32957

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME EVANS, JOHN
STREET ADDRESS 11155 ROSELAND RD
CITY-ST-ZIP SEBASTIAN FL 32958

[] DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

[] Change [] Addition

TITLE TD
NAME PARKER, CLIVE
STREET ADDRESS 11155 ROSELAND RD
CITY-ST-ZIP SEBASTIAN FL 32958

[] DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

[] Change [] Addition

TITLE SD
NAME HUTNER, CINDY
STREET ADDRESS 11105 ROSELAND RD
CITY-ST-ZIP SEBASTIAN FL 32958

[] DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

[] Change [] Addition

TITLE C
NAME ABELMAN, MICHAEL
STREET ADDRESS 11155 ROSELAND ROAD
CITY-ST-ZIP SEBASTIAN FL 32958

[] DELETE

4.1 TITLE
4.2 NAME Ableman, Michael
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

XX Change [] Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

[] DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

[] Change [] Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

[] DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

[] Change [] Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John G. Evans, President

1/6/97 561-589-1403

Daytime Phone # 0020373

CR2E037 (9/96)