2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Durga Das Hutner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Feb 21, 2007 8:00 am Secretary of State

02-21-2007 90019 030 ****70.00

2/16/07

772-589-1403

DOCUMENT # 743694 1. Entity Name KASHI CHURCH FOUNDATION, INC.				02-21-2007 90019 030 70.00
11155 ROSELAND RD 111		Mailing Address 11155 ROSELAND RD SEBASTIAN, FL 32958	US	
Principal Place of Business - No P.O. Box # 3		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02152007 Chg-NP CR2E037 (12/06)
City & State		City & State		4. FEI Number Applied For 59-1850384 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired X \$8.75 Additional Fee Required
6. Name and Address of Current Re		Registered Agent	Name	7. Name and Address of New Registered Agent
EVANS, JOHN G. 11155 ROSELAND ROAD ROSELAND, FL 32957				Address (P.O. Box Number is Not Acceptable)
			City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when renstating) DATE Filling Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Due by May 1, 2007 Make check payable to Florida Department of State				
10.	OFFICERS AND D	RECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HATHAWAY, RICHARD 11195 ROSELAND ROAD SEBASTIAN, FL 32958	XIX Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	11195 Roseland Road, Apt. 3
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HUTNER, DURGA DAS 11105 ROSELAND ROAD # 3 SEBASTIAN, FL 32958	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	Sebastian, FL 32958 Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HUTNER, KRISHNAPRIYA 11105 ROSELAND RD SEBASTIAN, FL 32958	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ABLEMAN, MICHAEL 11155 ROSELAND ROAD SEBASTIAN, FL	☐ Delete	NAME STREET ADDRESS CITY-S1-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	CD HAESELER, DAVID 11155 ROSELAND RD SEBASTIAN, FL 32958	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with all address, with all other like empowered.				