

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743694

FILED
Mar 25, 2009
Secretary of State

Entity Name: KASHI CHURCH FOUNDATION, INC.

Current Principal Place of Business:

11155 ROSELAND RD
SEBASTIAN, FL 32958 US

New Principal Place of Business:

11155 ROSELAND RD
#10
SEBASTIAN, FL 32958 US

Current Mailing Address:

11155 ROSELAND RD
SEBASTIAN, FL 32958 US

New Mailing Address:

11155 ROSELAND RD
#10
SEBASTIAN, FL 32958 US

FEI Number: 59-1850384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EVANS, JOHN G.
11155 ROSELAND ROAD
ROSELAND, FL 32957 US

Name and Address of New Registered Agent:

EVANS, JOHN G.
11155 ROSELAND ROAD
SEBASTIAN, FL 32958 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:

03/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: HUTNER, DURGA DAS
Address: 11105 ROSELAND ROAD # 3
City-St-Zip: SEBASTIAN, FL 32958

Title: VPD (X) Delete
Name: HUTNER, KRISHNAPRIYA
Address: 11105 ROSELAND RD
City-St-Zip: SEBASTIAN, FL 32958

Title: PD () Delete
Name: ABLEMAN, MICHAEL
Address: 11155 ROSELAND ROAD
City-St-Zip: SEBASTIAN, FL

Title: CD () Delete
Name: HAESELER, DAVID
Address: 11155 ROSELAND RD
City-St-Zip: SEBASTIAN, FL 32958

Title: SD () Delete
Name: HORNE, LUCY
Address: 11195 ROSELAND RD APT 3
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: ABLEMAN, MICHAEL
Address: 11155 ROSELAND ROAD
City-St-Zip: SEBASTIAN, FL 32958

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL ABLEMAN

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date