2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Jan 31, 2005 8:00 am Secretary of State **DOCUMENT # 766717** 1. Entity Name 01-31-2005 90046 005 ****61.25 KOINONIA - 33570, INC. Principal Place of Business Mailing Address 1505 GULF CITY RD. RUSKIN FL 33570 1505 GULF CITY RD RUSKIN FL 33570 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State 4. FEI Number Applied For City & State 59-2259018 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROWN, TOM FAIRFIELD Street Address (P.O. Box Number is Not Acceptable) 1511 SUN CITY CENTER PLAZA SUN CITY CENTER FL 33570 City 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State Salar Salar ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete TITLE THILE Change Addition FOLTS, JEFFREY NAME MAME 1505 GULF CITY RD.,#9 STREET ADDRESS STREET ADDRESS RUSKIN FL CITY-ST-7IP CITY-ST-ZIP VD TITLE ☐ Defete TITLE Change ☐ Addition BORDNER, DEBRA NAME NAME 5005 BONITA DR. STREET ADDRESS STREET ADDRESS WIMAUMA FL CHY-SI-749 CITY-ST-7IP STD TITLE ___ Defete TITLE ☐ Addition BUHRKUHL, BETTY NAME NAME 1505 GULF CITY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP RUSKIN, FL 00000 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition GRAFF, CINDI L NAME NAME Sandra Varn 1505 GULF CITY RD LOT 7 1505 Gulf City Rd-Lot7 STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP 33570 TITLE ☐ Delete TITLE ☐ Change ☐ Addition FOLTS, DAWN NAME NAME 1505 GULF CITY RD.,#9 STREET ADDRESS STREET ADDRESS **RUSKIN FL** CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition BORDNER, BILLY NAME NAME 5005 BONITA DR. STREET ADDRESS STREET ADDRESS WIMAUMA FL CITY-ST-7IP CITY-ST-7IP

12. I 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 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 an address, with all other like empowered.

Jan. 24, 2005

FILED