

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # 766717

1. Entity Name

KOINONIA - 33570, INC.



Principal Place of Business

Mailing Address

1505 GULF CITY RD.
RUSKIN FL 33570
US

1505 GULF CITY RD
RUSKIN FL 33570

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2259018

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWN, TOM FAIRFIELD
1511 SUN CITY CENTER PLAZA
SUN CITY CENTER FL 33570

Name

Street 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 reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input type="checkbox"/> Delete
NAME	FOLTS, JEFFREY	
STREET ADDRESS	1505 GULF CITY RD.,#9	
CITY-STATE-ZIP	RUSKIN FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	BORDNER, DEBRA	
STREET ADDRESS	5005 BONITA DR.	
CITY-STATE-ZIP	WIMAUMA FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	BUHRKUHL, BETTY	
STREET ADDRESS	1505 GULF CITY RD	
CITY-STATE-ZIP	RUSKIN, FL 00000	
TITLE	D	<input type="checkbox"/> Delete
NAME	VARN, SANDRA	
STREET ADDRESS	1505 GULF CITY RD LOT 7	
CITY-STATE-ZIP	RUSKIN FL 33570	
TITLE	D	<input type="checkbox"/> Delete
NAME	FOLTS, DAWN	
STREET ADDRESS	1505 GULF CITY RD.,#9	
CITY-STATE-ZIP	RUSKIN FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BORDNER, BILLY	
STREET ADDRESS	5005 BONITA DR.	
CITY-STATE-ZIP	WIMAUMA FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
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STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 an address, with all other like empowered.

SIGNATURE:

Betty G. Behrkuhl

Jan. 31, 2007 813-645-1034