

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836957

FILED
Feb 08, 2007
Secretary of State

Entity Name: AQUARIAN FOUNDATION

Current Principal Place of Business:

315 15TH AVE. EAST
SEATTLE, WA 98112

New Principal Place of Business:

Current Mailing Address:

315 15TH AVE. EAST
SEATTLE, WA 98112

New Mailing Address:

FEI Number: 91-6050343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WERNER, J
Address: 416 35TH AVE
City-St-Zip: SEATTLE, WA 98122

Title: SD () Delete
Name: MASTERS, A.
Address: 315 15TH AVE. EAST
City-St-Zip: SEATTLE, WA 38112

Title: D () Delete
Name: LITMAN, N
Address: 315 15TH AVENUE EAST
City-St-Zip: SEATTLE, WA 98112

Title: D () Delete
Name: TURNER, DR. N.
Address: 416 35TH AVE.
City-St-Zip: SEATTLE, WA 98112

Title: T () Delete
Name: WITHERS, ALAN R.,
Address: 416-35TH AVENUE
City-St-Zip: SEATTLE, WA

Title: VP () Delete
Name: BICKERSTAFF, T
Address: 315 15TH AVE. E
City-St-Zip: SEATTLE, WA 98112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: TED BICKERSTAFF

VP

02/08/2007

Electronic Signature of Signing Officer or Director

Date