

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003623

FILED
Jan 03, 2007
Secretary of State

Entity Name: TO KINDLE SPIRIT, A NOT FOR PROFIT CORPORATION

Current Principal Place of Business:

8608 QUEEN ELIZABETH BLVD.
ANNANDALE, VA 22003

New Principal Place of Business:

Current Mailing Address:

8608 QUEEN ELIZABETH BLVD.
ANNANDALE, VA 22003

New Mailing Address:

FEI Number: 01-0673680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLETS, EUNICE
2825 SW 22 AVE., STE. 105
DELRAY BEACH, FL 33445 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: CPST () Delete
Name: WERFEL, MARK
Address: 8608 QUEEN ELIZABETH BLVD.
City-St-Zip: ANNANDALE, VA 22003

Title: V () Delete
Name: FINKLESTEIN, ELLY
Address: 3208 BARBARA LANE
City-St-Zip: FAIRFAX, VA 22031

Title: DV () Delete
Name: FINKLESTEIN, BENJAMIN
Address: 3208 BARBARA LANE
City-St-Zip: FAIRFAX, VA 22031

Title: D () Delete
Name: YAFFE, DAVID
Address: 4622 4TH RD. NORTH
City-St-Zip: ARLINGTON, VA 22203

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
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: MARK WERFEL

CPST

01/03/2007

Electronic Signature of Signing Officer or Director

Date