

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001347

FILED
Apr 02, 2004
Secretary of State

Entity Name: KALAMA BEACH CORPORATION (CA)

Current Principal Place of Business:

7499 AUGUSTA NATIONAL DR
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

3536 HARDING AVE., STE 500
HONOLULU, HI 968162453

New Mailing Address:

FEI Number: 95-4350907 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WESTON, THOMAS R
Address: 3536 HARDING AVE., #500
City-St-Zip: HONOLULU, HI

Title: D () Delete
Name: SULLIVAN, KATHLEEN W
Address: 1892 JUDD HILLSIDE ST
City-St-Zip: HONOLULU, HI 96822

Title: S () Delete
Name: KAWANO, ANDREW T
Address: 3536 HARDING AVE., #500
City-St-Zip: HONOLULU, HI

Title: T () Delete
Name: WALL, ROGER J
Address: 3536 HARDING AVE., #500
City-St-Zip: HONOLULU, HI

Title: D () Delete
Name: WALL, M J
Address: 3536 HARDING AVE., #500
City-St-Zip: HONOLULU, HI

Title: D () Delete
Name: SULLIVAN, COLLEEN
Address: 3536 HARDING AVE., #500
City-St-Zip: HONOLULU, HI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: WESTON, THOMAS R
Address: 3536 HARDING AVE., #500
City-St-Zip: HONOLULU, HI

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

Title: V (X) Change () Addition
Name: KAWANO, ANDREW T
Address: 3536 HARDING AVE., #500
City-St-Zip: HONOLULU, HI

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 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW KAWANO

V

04/02/2004

Electronic Signature of Signing Officer or Director

_____ Date