

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001830

Entity Name: HIMALAYAN CHILDREN'S CHARITIES, INC.

FILED
Jan 12, 2004
Secretary of State

Current Principal Place of Business:

355 BROOK FORD PT
ALPHARETTA, GA 30022

New Principal Place of Business:

Current Mailing Address:

355 BROOK FORD PT
ALPHARETTA, GA 30022

New Mailing Address:

FEI Number: 65-0995336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEENAN, BRUCE
7928 WEST DRIVE #509
N BAY VILLAGE, FL 33141 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: DIR () Delete
Name: SCHLABAUGH, JOHN
Address: 1117 MT CARMEL CHURCH RD
City-St-Zip: CHAPEL HILL, NC 27514

Title: PRES () Delete
Name: KEENAN, BRUCE
Address: 7928 WEST DRIVE APT 509
City-St-Zip: N BAY VILLAGE, FL 33141

Title: DIR () Delete
Name: KEENAN, SUSAN
Address: 355 BROOK FORD PT
City-St-Zip: ALPHARETTA, GA 30022

Title: DIR () Delete
Name: TATTA, ADELE
Address: 1117 MT CARMEL CHURCH RD
City-St-Zip: CHAPEL HILL, NC 27514

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

SIGNATURE: BRUCE KEENAN

PRES

01/12/2004

Electronic Signature of Signing Officer or Director

Date