

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006449

FILED
Jan 28, 2007
Secretary of State

Entity Name: KARMA THEGSUM CHOLING, JACKSONVILLE, INC.

Current Principal Place of Business:

1258 MCDUFF AVENUE SOUTH
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

1258 MCDUFF AVENUE SOUTH
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-3529768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURNQUIST, MICHAEL
3767 SOMMERS ST.
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

TURNQUIST, MICHAEL
1530 PATRICK ROAD
JACKSONVILLE, FL 32234 US

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: _____

01/28/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TURNQUIST, MICHAEL
Address: 3767 SOMMERS ST.
City-St-Zip: JACKSONVILLE, FL 32205

Title: D () Delete
Name: VIRZERA, MICHAEL
Address: 1163 DAY AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: D () Delete
Name: KESSLER, CYNTHIA C
Address: 5490 ANCHOR LANE
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TURNQUIST, MICHAEL
Address: 1530 PATRICK ROAD
City-St-Zip: JACKSONVILLE, FL 32234

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: MICHAEL D. TURNQUIST

D

01/28/2007

Electronic Signature of Signing Officer or Director

Date