

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003168

FILED  
Aug 30, 2007  
Secretary of State

Entity Name: SILK ROAD FOUNDATION CORP.

**Current Principal Place of Business:**

7715 WEST SR 235  
ALACHUA, FL 32615

**New Principal Place of Business:**

13905 NORTHWEST 137TH PLACE  
ALACHUA, FL 32615

**Current Mailing Address:**

7715 WEST SR 235  
ALACHUA, FL 32615

**New Mailing Address:**

13905 NORTHWEST 137TH PLACE  
ALACHUA, FL 32615

FEI Number: 27-0053972      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HENDERSON, CHARLES  
7715 WEST SR 235  
ALACHUA, FL 32615      US

**Name and Address of New Registered Agent:**

MAINIERI, OLGA  
13905 NORTHWEST 137TH PLACE  
ALACHUA, FL 32615      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: OLGA MAINIERI

08/30/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: HOBGOOD, SEAN O  
Address: 116 HARDING PLACE, SUITE B4  
City-St-Zip: NASHVILLE, TN 37205

Title: VPD      ( ) Delete  
Name: ZUGSMITH, MARK  
Address: 2020 SOUTH WESTERN AVENUE, SUITE 8  
City-St-Zip: SAN PEDRO, CA 90732

Title: STMD      ( ) Delete  
Name: BROWN, JASON M  
Address: 4423 WALNUT ST GROUND FL  
City-St-Zip: PHILADELPHIA, PA 19104

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: HOBGOOD, SEAN O  
Address: 13905 NORTHWEST 137TH PLACE  
City-St-Zip: ALACHUA, FL 32615

Title: VPD      (X) Change ( ) Addition  
Name: MAINIERI, OLGA  
Address: 13905 NORTHWEST 137TH PLACE  
City-St-Zip: ALACHUA, FL 32615

Title: STMD      (X) Change ( ) Addition  
Name: BROWN, JASON M  
Address: 1207 PIKE STREET  
City-St-Zip: EASTON, PA 18045

I hereby certify that the information supplied with this filing does not qualify 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: JASON M BROWN

STMD

08/30/2007

Electronic Signature of Signing Officer or Director

Date