2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21603

FILED Mar 24, 2006 Secretary of State

Entity Name: KARVE CHARITABLE FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2091 SW 55TH ST. RD. OCALA, FL 34474 **Current Mailing Address: New Mailing Address:** 2091 SW 55TH ST. RD OCALA, FL 34474 FEI Number: 59-2849765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KARVE, NR 2091 SW 55TH ST RD OCALA, FL 34474 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KARVE, NANDKUMAR R., Name: Name: Address: 2091 S.W. 55TH ST. RD Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: Title: () Delete Title: () Change () Addition KARVE, PRITI N., Name: Name: Address: 2091 S.W. 55TH ST. RD Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: Title: () Delete Title: (X) Change () Addition KARVE, ASHISHI N., Name: KARVE, ASHISHI N., Name: 33435 E.LAKE JOANNA DRIVE Address: 4050 BRITT RD Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: EUSTIS, FL 32736 Title: () Delete Title: (X) Change () Addition Name: POORTI, KARVE Name: POORTI, RILEY K Address: 3025 S HWY 475 Address: 13025 S. HWY 475 City-St-Zip: OCALA, FL 34480 City-St-Zip: OCALA, FL 34480

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: NANDKUMAR R KARVE C 03/24/2006