

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23428

FILED
Apr 10, 2007
Secretary of State

Entity Name: THE SATHYA PREMA CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

376 HERBERT PAGE RD
TRYON, NC 28782 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1460
C/O BARBARA GAIL BLATE
COLUMBUS, NC 28722 US

New Mailing Address:

FEI Number: 65-0022653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURTZ, MARTIN CPA
LONDON WITTE & CO. PA
3101 N FEDERAL HWY STE 700
FORT LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

KURTZ, MARTIN CPA
LONDON WITTE & CO. PA
3101 N FEDERAL HWY 8TH FLOOR
FORT LAUDERDALE, FL 33306 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:

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BLATE, BARBARA G
Address: 376 HERBERT PAGE RD
City-St-Zip: TRYON, NC 28782

Title: D () Delete
Name: BAKER, LAURIE BLATE,
Address: 376 HERBERT PAGE RD
City-St-Zip: TRYON, NC 28782

Title: D () Delete
Name: RUBY, DIANE
Address: 341 HERBERT PAGE RD
City-St-Zip: TRYON, NC 28782

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:

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: BARBARA GAIL BLATE

D

04/10/2007

Electronic Signature of Signing Officer or Director

Date