

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44375

Entity Name: KRISHNA COMMUNITY FUND, INC.

FILED  
Apr 29, 2004  
Secretary of State

## Current Principal Place of Business:

17818 NW 112TH BLVD  
ALACHUA, FL 32615 US

## New Principal Place of Business:

## Current Mailing Address:

P.O.BOX 2036  
ALACHUA, FL 32616

## New Mailing Address:

FEI Number: 59-3079064

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KENNETH SOLOMON  
5614 W. STATE ROAD 235  
LACROSSE, FL 32658 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: VD ( ) Delete  
Name: CURTIS, RON  
Address: P.O. BOX 232 NA  
City-St-Zip: LACROSSE, FL

Title: TD ( ) Delete  
Name: SOLOMON, KENNETH  
Address: 5614 W SR 235  
City-St-Zip: LACROSSE, FL 32658

Title: D ( ) Delete  
Name: TORGERSEN, STEVE  
Address: 6120 W SR 235  
City-St-Zip: LACROSSE, FL 32658

Title: SD ( ) Delete  
Name: ZALDIVAR, RAMON  
Address: 18929 CR 239  
City-St-Zip: ALACHUA, FL 32615

Title: PD ( ) Delete  
Name: JAKUPKO, DAVID  
Address: P.O. BOX 1445 NA  
City-St-Zip: ALACHUA, FL

## 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:

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: KENNETH SOLOMON

TD

04/29/2004

Electronic Signature of Signing Officer or Director

Date