2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N93000002496

FILED Apr 26, 2006 8:00 am Secretary of State 04-26-2006 90203 048 ****61.25

Entity Name	
EACHOUT FOUNDATION, INC.	

REACHO	IUT FOUNDATION, INC.				0.80		
Principal Plac ROUTE 13, E LAKE CITY, F	30X 416	Mailing Address ROUTE 13, BOX 416 LAKE CITY, FL 32055	.,	4006	,		B) #1 (#B)
2. Principal P	lace of Business NW HERON GLEN #, etc.	3. Mailing Address 118 NW HER Suite, Apt. #, etc.	SON ETI		hg-NP CR2E0	37 (11/05)	
City & Stat		City & State	1 420	4. FEI Number 59-319481	6		lied For Applicable
320	Country	32055	Country	5. Certificate of St	atus Desired	\$8.75 Addit	• •
	6. Name and Address of Current R	legistered Agent		7. Name and Add	ress of New Registered	Agent	
BHASKAR	GIRISH DR	•	Name				
BHASKAR, GIRISH DR. 118 NW HERON GLEN LAKE CITY, FL 32055		dress (P.O. Box Number is I	Not Acceptable)				
			City		FL	Zip Code	
8. The above	named entity submits this statement for	the purpose of changing its reg	gistered office or re	egistered agent, or both, in	the State of Florida. I am	familiar with, a	nd accept
the obligat	ions of registered agent.					. 1	
CICNATURE	In Nolu	ull			41181	06	
SIGNATURE .	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: Re	egistered Agent signature	required when reinstating)	DATE		
					<u> </u>		
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campa Trust Fund Conf		\$5.00 May Be Added to Fees	Make checi Florida Depar	k payable to tment of Sta	te
10.	Due by May 1, 2006 OFFICERS AND DIR	Trust Fund Cont		Added to Fees		tment of Sta	
TITLE	OFFICERS AND DIRI	Trust Fund Conf	11.	Added to Fees ADDITIONS/CHANG	Florida Depar	tment of Sta	
TITLE NAME	OFFICERS AND DIRI P SREEDHARAN, MANALEL	Trust Fund Conf	11. TITLE NAME	Added to Fees ADDITIONS/CHANG P KUMAR , SAT	Florida Depar ES TO OFFICERS AND DII HEESH M.D	tment of Sta	0
TITLE NAME STREET ADDRESS	OFFICERS AND DIRI P SREEDHARAN, MANALEL 12512 E SANDY CREEK LN	Trust Fund Conf	11. TITLE NAME SIREET ADDRESS	Added to Fees ADDITIONS/CHANG P KUMAR, SAT A17 KINGSU	Florida Depar ES TO OFFICERS AND DI HEESH M.D WOOD	tment of Sta	0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRI P SREEDHARAN, MANALEL	Trust Fund Con	Tribution. 11. TITLE NAME SIREET ADDRESS CITY-SI-ZIP	Added to Fees ADDITIONS/CHANG P KUMAR, SAT FIT KINGSU EL PASO, T	Florida Depar ESTO OFFICERS AND DI HEESH M.D UOOD X 7993R	RECTORS IN 1	O Addition
TITLE NAME STREET ADDRESS	P SREEDHARAN, MANALEL 12512 E SANDY CREEK LN CERRITOS, CA 90703	Trust Fund Conf	Tribution. 11. IITLE NAME SIREET ADDRESS CITY-ST-ZIP IITLE NAME	Added to Fees ADDITIONS/CHANG P KUMAR, SAT AIY KINGSU EL PASO, 7 T RAJAN, SAR	Florida Depar ESTO OFFICERS AND DI HEESH M.D WOOD X 7993R	Thent of Sta	O Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P SREEDHARAN, MANALEL 12512 E SANDY CREEK LN CERRITOS, CA 90703 T GOPINATH, G M.D. 680 BRIARWOOD COURT ORADELL, NJ 07649	Trust Fund Con	Tribution. 11. IIILE NAME SIREET ADDRESS CITY-SI-ZIP IIILE NAME SIREET ADDRESS CITY-SI-ZIP	Added to Fees ADDITIONS/CHANG F KUMAR, SAT FIY KINGSU EL PASO, T RAJAN, SAR RAJAN, SAR RAJAN, SAR RABB NEWF MERRITT	Florida Depar ESTO OFFICERS AND DI HEESH M.D WOOD TX 79938 EAVANA M.I OUND HAB	Change	O Addition
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LICENTATION OF SIGNING OFFICER OR DIRECTOR