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Jul 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600003909

1. Corporation Name
Children of Krishna, Inc.

Principal Place of Business Mailing Address

2. Principal Place of Business 2a. Mailing Address

21 14120 N Main St. 26 PO Box 1317

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State Alachua, FL 28 City & State Alachua, FL

24 Zip 32615 25 Country USA 29 Zip 32616 30 Country USA

3. Date Incorporated or Qualified July 24, 1996 3a. Date of Last Report

4. FEI Number 59-3401602 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

Keith Domingo
14120 MLK BLVD
ALACHUA FL 32615

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS

TITLE DIRECTOR DELETE

NAME GEOFFREY WALKER

STREET ADDRESS 9800 Kable Ter.

CITY-ST-ZIP Rockville, MD 20850

TITLE DIRECTOR DELETE

NAME Robert Morrill

STREET ADDRESS 1030 brand Avenue

CITY-ST-ZIP San Diego, CA 92109

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR / President Change Addition

1.2 NAME Keith R Domingo

1.3 STREET ADDRESS 14120 MLK Blvd.

1.4 CITY-ST-ZIP Alachua, FL 32616

2.1 TITLE TRUSTEE Change Addition

2.2 NAME Krishna Cole

2.3 STREET ADDRESS 11006 NW RACHEL BLVD

2.4 CITY-ST-ZIP Alachua FL 32615

TITLE DIRECTOR DELETE

NAME Jennifer Hester

STREET ADDRESS 805 Alachua Apts.

CITY-ST-ZIP Alachua, FL 32616

TITLE DIRECTOR DELETE

NAME Emanuel Kessler

STREET ADDRESS 3765 Winseka Ave. #17

CITY-ST-ZIP LA, CA 90034

TITLE DIRECTOR DELETE

NAME Naman Karuna

STREET ADDRESS 18107 NW CR239

CITY-ST-ZIP Alachua, FL 32616

TITLE DIRECTOR DELETE

NAME Michael McKel

STREET ADDRESS 509 Hillsborough St.

CITY-ST-ZIP Chapel Hill, NC 27515-9360

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

600002239146

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Change Addition

Change Addition

Change Addition

Change Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Keith R Domingo 4/10/97 (904) 462 5663

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/96)