FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 1. Corporation Name N96000003909

FILED May 08 1998 8:00 am Secretary of State

Children of Krishna, 1	_V∩ C .	
Principal Place of Business Mailing Address		7
14120 N. Main St. P.O. BOX 1	317	3. Date Incorporated or Qualified
Alachua, Fl. 32615 Alachua, F		July 24, 1996
Macroud, FC. Saels Macroad, F	-(. 3001)	4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address		59-340160A Not Applicable
27 15914 NW. 120 th PL. 26 P.O. Bon 3	3458	5. Certificate of Status Desired \$8.75 Additional Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc.	1	6. Election Campaign Financing \$5.00 May Be
22 27 City & State City & State		Trust Fund Contribution L Added to Fees
23 Alachua FL. 28 Alachua	FL.	7. Is this nonprofit corporation a homeowners association?
Zip Country Zip	Country	8. This corporation owes or has paid the current year Intangible
24 32615 25 29 32616 31 9. Name and Address of Current Registered Agent	<u> </u>	Personal Property Tax due June 30. La Yes No 10. Name and Address of New Registered Agent
	81 Name	
Keith Domingo B2 Street Address (P.O. Box Number is Not Accession		
14120 N. Main St.	1591	
	63	
Alachua, FL. 32615	84 City	FI 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 amiliar with, and accept the obligations of Section 617.0503, Florida Statutes		
SIGNATURE - 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
12. Of FICE HS AND DIRECTORS	registered Agent signature requires	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME Geoffiey Walker 1	1.2 NAME	
STREET ADDRESS 1206 THEUSURE OAK COURT	1.3 STREET ADDRESS	
CITY-SI-ZIP ROCKVILLO, MD 20852	1.4 CITY - ST - ZIP 2.1 TITLE	Change Addition
NAME DP Keith Domingo,	2.2 NAME	D Custilise Manufacturi
STREET ADDRESS 14120 MKK Blud.	2.3 STREET ADDRESS	
CITY-ST-ZIP Alachua FL 32615	2. 4 CITY-ST-ZIP	
TITLE DELETE	3.1 TITLE D	M/T Com Name Change Addition
NAME Krsna Cole STREET ADDRESS 11006 NW Rachel Blud.	3.2 NAME 3.3 STREET ADDRESS	Tennifer Haggard 15914 NW. 12044 PL.
city-si-zip Alachua, PL, 32615	3.4 CITY-ST-ZIP	Alachua, Fl. 33615
TITLE I - DELETE I	4.1 TITLE	Change Addition
NAME 10001 11011	4. 2 NAME	David Wolf 17303 N.W. 11244 Blud.
STREET ADDRESS 1030 Grand Ave.	4.3 STREET ADDRESS	01305 70.00. 11211 15104.
CITY-ST-ZIP San Diego, CA 92109	4.4 CITY - ST - ZIP 5.1 TITLE	Alachua, FL. 32615 Change Addition
NAME D Emanuel Kaseder # ,7	5.2 NAME	Change - Adultion
STREET ADDRESS 3765 Watselaa Ave. #11	5.3 STREET ADDRESS	425 Leonard Ave vsll
CITY-SI-ZIP LOS Angeles, CA 90034	5.4 CITY - ST - ZIP	Dekallo, IL 60115
TITLE DELETE	6.1 TITLE	9000025238 9 9
NAME MICHAEL PUCKEE	6.2 NAME	<u>-05</u> 214/3801038014
STREET ADDRESS 529 Itillsborough St. CHARAL ITU, NC 27515, 9360	1	ማመም (U , UU
		Section 119 07/3)(i) Florida Statutes 1 further certify that the information

Trialeby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the informatio 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.