# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 27, 2005**
**Secretary of State**

DOCUMENT# N97000007194

**Entity Name:** THE KOINONIA FOUNDATION, INC.

**Current Principal Place of Business:**

2401 WHITEHAU CIRCLE
WINTER PARK, FL 32792

**New Principal Place of Business:**

2401 WHITEHALL CIRCLE
WINTER PARK, FL 32792

**Current Mailing Address:**

2401 WHITEHAU CIRCLE
WINTER PARK, FL 32792

**New Mailing Address:**

2401 WHITEHALL CIRCLE
WINTER PARK, FL 32792

**FEI Number: 20-0567212** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RHODES, R. SPENCER
126 E. JEFFERSON ST.
ORLANDO, FL 32801 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: D ( ) Delete
Name: BERNAL, PEDRO DR.
Address: 2401 WHITEHAU CIRCLE
City-St-Zip: WINTER PARK, FL 32792

Title: D ( ) Delete
Name: COOK, THOMAS DR
Address: ROLLINS COLLEGE
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete
Name: RHODES, SPENCER
Address: 126 E JEFFERSON STREET
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete
Name: THAKURDIN, JEREMY
Address: 8219 VIA BERONA
City-St-Zip: ORLANDO, FL 32836

Title: D ( ) Delete
Name: ROTHWELL, GARY H
Address: 310 SPRING VALLEY DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**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: PEDRO BERNAL DR. 04/27/2005

Electronic Signature of Signing Officer or Director Date