

**STATE OF HAWAII**  
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS  
BUSINESS REGISTRATION DIVISION  
335 Merchant Street  
Mailing Address: Annual Filing, P.O. Box 40, Honolulu, HI 96810

**DOMESTIC NONPROFIT CORPORATION ANNUAL REPORT AS OF April 1, 2018**

**CORPORATION NAME AND MAILING ADDRESS**

EIA HAWAII FUND  
1441 KAPIOLANI BLVD STE 1115 PMB 00054  
HONOLULU HI 96814-4406

**Principal Office Address**

1441 KAPIOLANI BLVD STE 1115 PMB 00054  
HONOLULU HI 96814-4406

**1. Nature of Activities**

NONPROFIT TO RAISE FUNDS TO FINANCE SOCIAL, EDUCATIONAL, CULTURAL AND ENVIRONMENTAL PROGRAMS AND INITIATIVE IN THE STATE OF HAWAII...SEE ARTICLES

**2. The name of the registered agent and the registered agent's street address of the place of business in Hawaii of the person to which service of process and other notice and documents being served on or sent to the entity represented by it may be delivered to.**

UNITED STATES CORPORATION AGENTS, INC.  
1003 BISHOP ST STE 2700  
HONOLULU HI 96813

**3. List all officers and directors.**

Offices Held	Full Name	Address
P/D	DAVIES, KERIANNE LOUISE	[REDACTED]
T/D	KNIGHTS, D [REDACTED] [REDACTED]	[REDACTED]
V/S/D	MERSILIAN, S [REDACTED]	[REDACTED]

<input checked="" type="checkbox"/>	<b>NO CHANGES</b> Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.
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**CERTIFICATION**

I certify under the penalties of Section 414D-12, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

April 23, 2018	KERIANNE LOUISE DAVIES	KERIANNE LOUISE DAVIES
Date	Signature of authorized officer, attorney-in-fact for an officer, or receiver or trustee (if the corporation is in the hands of a receiver or trustee)	Print Name

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