

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005769

FILED
Jan 20, 2009
Secretary of State

Entity Name: ALMA FINANCIAL ASSISTANCE CORP.

Current Principal Place of Business:

1701 W. HILLSBORO BLVD. SUITE 402
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9603
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 47-0863848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARREA, ALBERTO
1701 W. HILLSBORO BLVD. SUITE 402
DEERFIELD BEACH, FL 33442 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: PD () Delete
Name: LARREA, ALBERTO
Address: 12143 FOREST GREENS DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: V () Delete
Name: SANDOVAL, RUBEN
Address: 9994 NW 56TH PLACE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: MENDEZ, CARLOS
Address: 1231 NW 123 AVE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: P () Delete
Name: RODRIGUEZ, JORGE
Address: 7991 W. 15TH LANE
City-St-Zip: HIALEAH, FL 33014

Title: D () Delete
Name: WLADIMIRSKI, ISRAEL
Address: 22384 THOUSAND PINES LANE
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: WILSON, SCOTT
Address: 1595 EASTLAKE WAY
City-St-Zip: WESTON, FL 33326

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: P (X) Change () Addition
Name: RODRIGUEZ, JORGE
Address: 15505 MIAMI LAKEWAY NORTH UNIT #203
City-St-Zip: MIAMI LAKES, FL 33014

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 exemption stated in Chapter 119, 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: RUBEN SANDOVAL

V

01/20/2009

Electronic Signature of Signing Officer or Director

Date