

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002182

FILED
Apr 28, 2009
Secretary of State

Entity Name: AMERICAN CONSOLIDATED BUSINESS OWNERS ALLIANCE, INC.

Current Principal Place of Business:

250 E. PARK AVE.
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

250 E. PARK AVE.
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 20-4204728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAFF, TULA M.
3399 CYPRESS GARDENS RD., STE. C
WINTER HAVEN, FL 33884 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: C () Delete
Name: RUMFELT, THOMAS B.
Address: 250 E. PARK AVE.
City-St-Zip: LAKE WALES, FL 33853

Title: VC () Delete
Name: SHAW, HUGH D.
Address: 250 E. PARK AVE.
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: BRADLEY, HELENE
Address: 250 E. PARK AVE.
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: RUMFELT, THOMAS B.
Address: 250 E. PARK AVE.
City-St-Zip: LAKE WALES, FL 33853

Title: VC (X) Change () Addition
Name: SHAW, HUGH D.
Address: 250 E. PARK AVE.
City-St-Zip: LAKE WALES, FL 33853

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: THOMAS B. RUMFELT

C

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date