

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N01000001091

Entity Name: METROPOLITAN ENVIRONMENTAL TRAINING ALLIANCE, INC.

Current Principal Place of Business:

3319 MAGUIRE BLVD.
SUITE 232
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

3319 MAGUIRE BLVD.
SUITE 232
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 01-0574855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BURSON, LU
3319 MAGUIRE BLVD
STE 232
ORLANDO, FL 32803 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: STERMER, ANDREA
Address: 800 MERCY DRIVE, STE. 4
City-St-Zip: ORLANDO, FL 32808

Title: VC () Delete
Name: VALIN, DEBBIE
Address: 3319 MAGUIRE BLVD
City-St-Zip: ORLANDO, FL 32803

Title: T () Delete
Name: DICKERSON, JENNIFER
Address: 2382 RIVER TREE CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: STALEY-ARCHER, CHERYL
Address: 800 MERCY DRIVE, STE. 4
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: FREE, RANDY
Address: PO BOX 933
City-St-Zip: GOTHAM, FL 34734

Title: D () Delete
Name: GARRIDO, JOSE
Address: 8651 COMMODITY CIRCLE
City-St-Zip: ORLANDO, FL 32819

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
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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 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: JENNIFER DICKERSON

T

05/04/2009

Electronic Signature of Signing Officer or Director

_____ Date