## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400001009

Entity Name: SANTA MARIA DE LOS ANGELES, INC

FILED Sep 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6316 MATCHETT RD 26 WILLOW DR ORLANDO, FL 32809 ORLANDO, FL 32807 **Current Mailing Address:** New Mailing Address: 6316 MATCHETT RD 26 WILLOW DR ORLANDO, FL 32809 ORLANDO, FL 32807 FEI Number: 20-0764997 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: Name and Address of New Registered Agent: MIMS, WILLIAM L JR. 6316 MARCHETT RD. US ORLANDO, FL 32809 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: SW (X) Change ( ) Addition () Delete MAIESPIN, MILTON MALESPIN, MILTON Name: Name: 254 IOWA WOODS CIR Address: 254 IOWA WOODS CIR Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32824 Title: () Delete Title: () Change () Addition Name: SANCHEZ, ZENEYDA Name: Address: 12308 HOLLY JANE CT Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: () Delete Title: () Change () Addition MALESPIN, MARIO JR Name: Name: 12758 MAJORAMA DR Address: Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: Title: () Delete Title: () Change () Addition M RAMIREZ, NIVIA Name: Name: 160 SAN BLAS AVE Address: Address: City-St-Zip: KISSIMMEE, FL 34743 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CORDERO, LUIS Name: Name: 152 CERVIDAE DR Address: Address: City-St-Zip: APOPKA, FL 32807 City-St-Zip: Title: () Delete Title: () Change () Addition MALESPIN, MARIO SR Name: Name: Address: 284 WHITE MARSH Address: ORLANDO, FL 32824 City-St-Zip: 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: RAUL RUBIANO REV. 09/05/2009