2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000000534

1. Entity Name

THE JESSE MAALI HOUSE OF MERCY FOUNDATION, INC.



FILED Feb 11, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

7582 W. SAND LAKE ROAD ORLANDO, FL 32819

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01082008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-2281095 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAALI, BASSEL 7582 W. SAND LAKE ROAD ORLANDO, FL 32819

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25 Due by May 1, 2008 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE NAME MAALI, A.J. STREET ADDRESS 7582 W. SAND LAKE ROAD CITY-ST-ZIP ORLANDO, FL 32819 NAME ITANI, SAMIR STREET ADDRESS 7582 W. SAND LAKE ROAD CITY-ST-ZIP ORLANDO, FL 32819 TITLE NAME MUBARAK, AHMAD STREET ADDRESS 7582 W. SAND LAKE ROAD CITY-ST-ZIP ORLANDO, FL 32819 TITLE NAME MAALI, BASSEL STREET ADDRESS 7582 W. SAND LAKE ROAD CITY-ST-ZIP ORLANDO, FL 32819 TITLE D NAME MANSOUR, RIYAD STREET ADDRESS 7582 W. SAND LAKE ROAD CITY-ST-ZIP ORLANDO, FL 32819 TITI F NAME STREET ADDRESS CITY+ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with all accrees, with all other like empowered.

SIGNATURE:

SIGNATULE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/08 407-345-9202

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