

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001322

FILED  
May 12, 2009  
Secretary of State

**Entity Name:** ASOCIACION MEXICANA DEL NORESTE DE FLORIDA, INC.

**Current Principal Place of Business:**

1275 TALBOT AVENUE  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

7705 MONETTA DRIVE  
JACKSONVILLE, FL 32277

**Current Mailing Address:**

1275 TALBOT AVENUE  
JACKSONVILLE, FL 32205

**New Mailing Address:**

7705 MONETTA DRIVE  
JACKSONVILLE, FL 32277

**FEI Number:** 20-8405873      **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:**

ROMERO, CLAUDIA  
3502 EVE DRIVE EAST  
JACKSONVILLE, FL 32246      US

**Name and Address of New Registered Agent:**

ARELLANO, YOLANDA  
7705 MONETTA DRIVE  
JACKSONVILLE, FL 32277      US

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: YOLANDA ARELLANO

05/12/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ARELLANO, YOLANDA  
Address: 7705 MONETTA DR  
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD      ( ) Delete  
Name: ROMERO, CLAUDIA  
Address: 3502 EVE DR EAST  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VTD      (X) Delete  
Name: MICHALOWSKI, ANAHI  
Address: 1275 TALBOT AVENUE  
City-St-Zip: JACKSONVILLE, FL 32205

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: ARELLANO, YOLANDA  
Address: 7705 MONETTA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VTD      (X) Change ( ) Addition  
Name: MICHALOWSKI, ANAHI  
Address: 1275 TALBOT AVENUE  
City-St-Zip: JACKSONVILLE, FL 32205

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: YOLANDA ARELLANO

PD

05/12/2009

Electronic Signature of Signing Officer or Director

Date