

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 22, 2009
Secretary of State**

DOCUMENT# N97000005227

Entity Name: FILIPINO-AMERICAN ASSOCIATION OF POLK COUNTY, INC.

Current Principal Place of Business:

5835 BARTOW RD S
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

P O BOX 1717
EATON PARK, FL 338401717

New Mailing Address:

FEI Number: 59-3513645 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYER, CHARLES R
5835 BARTOW RD S
LAKELAND, FL 33813 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: P () Delete
Name: JAIN, MANUEL
Address: 1488 NO. LAKE MIRROR DR. N.W.
City-St-Zip: WINTER HAVEN, FL 33881

Title: V () Delete
Name: TALLO, DAISY
Address: 725 HIGHLAND PL. BLVD
City-St-Zip: LAKELAND, FL 33813

Title: T () Delete
Name: MORALETA, CONSUELO
Address: 3924 WHISTLEWOOD CIRCLE
City-St-Zip: LAKELAND, FL 33811

Title: S () Delete
Name: POINT, MARILOU
Address: 343 HEATHER POINT
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: ACOSTA, SHEILA
Address: 8059 RIDGEGLEN CIRCLE E
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: ARROYO, GENE
Address: 927 OAK LANE
City-St-Zip: LAKELAND, FL 33811

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: S (X) Change () Addition
Name: ONDRA, MARILOU
Address: 343 HEATHER POINT
City-St-Zip: LAKELAND, FL 33809

Title: D (X) Change () Addition
Name: ACOSTA, SHEILA
Address: 8059 RIDGEGLEN CIRCLE E
City-St-Zip: LAKELAND, FL 33809

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: CONSUELO N. MORALETA

Electronic Signature of Signing Officer or Director

TREA

02/22/2009

Date