

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001641

FILED
Feb 19, 2009
Secretary of State

Entity Name: WORLD LITERACY CRUSADE OF FLORIDA, INC.

Current Principal Place of Business:

6015 NW 7TH AVENUE
MIAMI, FL 33127 US

New Principal Place of Business:

Current Mailing Address:

6015 NW 7TH AVENUE
MIAMI, FL 33127

New Mailing Address:

FEI Number: 65-0737649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, THEMA
7910 W. DRIVE, #305
N. BAY VILLAGE, FL 33141 US

Name and Address of New Registered Agent:

CAMPBELL, THEMA
6015 NW 7TH AVENUE
MIAMI, FL 33127 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: THEMA CAMPBELL

02/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CAMPBELL, THEMA
Address: 7910 W DRIVE, #305
City-St-Zip: N. BAY VILLAGE, FL 33141

Title: C () Delete
Name: DARLING, GERALD CHIEF
Address: 6100 NW 2ND AVENUE
City-St-Zip: MIAMI, FL 33127

Title: VC () Delete
Name: DOZIER, CORNELIA
Address: 12330 SW 148 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: ANDREA, THOMPSON
Address: 503 12TH ST., UNIT 4
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CAMPBELL, THEMA
Address: 7910 W DRIVE, #305
City-St-Zip: N. BAY VILLAGE, FL 33141

Title: CHAI (X) Change () Addition
Name: PERSON, SYLVIA MRS.
Address: 701 NW FIRST COURT
City-St-Zip: MIAMI, FL 33147

Title: VCHA (X) Change () Addition
Name: THOMPSON, ANDREA
Address: 503 12ST STREET, UNIT 4
City-St-Zip: MIAMI BEACH, FL 33139

Title: TREA (X) Change () Addition
Name: JONES, LEROY
Address: 180 NW 62 STREET
City-St-Zip: MIAMI, FL 33150

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: THEMA CAMPBELL

PRES

02/19/2009

Electronic Signature of Signing Officer or Director

Date