2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003179

Entity Name: GUIDESTAR USA, INC

FILED Apr 08, 2009 Secretary of State

The state of the s						
Current Principal Place of Business:			New	New Principal Place of Business:		
4801 COURTHOUSE STREET SUITE 220 WILLIAMSBURG, VA 23188						
Current Mailing Address:			New	New Mailing Address:		
4801 COURTHOUSE STREET SUITE 220 WILLIAMSBURG, VA 23188						
FEI Number: 54-1774039 FEI Number Applied For () FEI Number			FEI Number N	ot Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
155 OFFICE SUITE A	ORPORATE S E PLAZA DRIVE SEE, FL 32301					
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			t		Date	
OFFICERS AND DIRECTORS:			ADD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RAPPAPORT, AL	JSE STREET #220	Title: Name Addre City-S	ss: 4801 CC	(X) Change () Addition PORT, ALAN DURTHOUSE STREET #220 ISBURG, VA 23188	
Title: Name: Address: City-St-Zip:	SALYER, STEPH	JSE STREET #220	Title: Name Addre City-S	ss:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AVIV, DIANA	velete USE STREET #220 VA 23188	Title: Name Addre City-S	ss:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OTTENHOFF, RO	JSE STREET #220	Title: Name Addre City-S	ss:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BROWN, DAVID V	JSE STREET #220	Title: Name Addre City-S	ss:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TINSLEY, TOM	velete USE STREET #220 VA 23188	Title: Name Addre City-S	ss: 4801 CC	(X) Change () Addition (, TOM DURTHOUSE STREET #220 ISBURG, VA 23188	

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: ROBERT G. OTTENHOFF PD 04/08/2009