

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719834

FILED
Feb 02, 2009
Secretary of State

Entity Name: BELAFONTE TACOLCY CENTER, INCORPORATED

Current Principal Place of Business:

6161 N.W. 9TH AVENUE
MIAMI, FL 331271013

New Principal Place of Business:

6161 N.W. 9TH AVENUE
MIAMI, FL 331271013 US

Current Mailing Address:

6161 N.W. 9TH AVENUE
MIAMI, FL 331271013

New Mailing Address:

6161 N.W. 9TH AVENUE
MIAMI, FL 331271013 US

FEI Number: 59-1376077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AUSTIN, ALISON D
6161 NW 9TH AVE.
MIAMI, FL 33127 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: C () Delete
Name: BARNES, ARTHUR
Address: 6003 SW 154TH COURT
City-St-Zip: MIAMI, FL 33193

Title: T () Delete
Name: WALTHOUR, SAM
Address: 6756 CAMELIA DRIVE
City-St-Zip: MIRAMAR, FL 33023

Title: S () Delete
Name: PRISCILLA, BEATTY
Address: 441 GRAND CANCOURSE
City-St-Zip: MIAMI, FL 33138

Title: CEO () Delete
Name: AUSTIN, ALISON D
Address: 6161 NW 9TH AVE
City-St-Zip: MIAMI, FL 33127

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHR (X) Change () Addition
Name: BARNES, ARTHUR
Address: 6003 SW 154TH COURT
City-St-Zip: MIAMI, FL 33193

Title: VC (X) Change () Addition
Name: WILLIS, JOAQUIN REV.
Address: 6001 NW 8TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: SEC. (X) Change () Addition
Name: BEATTY, PRISCILLA
Address: 441 GRAND CANCOURSE
City-St-Zip: MIAMI, FL 33138

Title: TREA (X) Change () Addition
Name: WILLIS, HATTIE
Address: 5510 NW 1ST AVENUE
City-St-Zip: MIAMI, FL 33127

Title: CEO () Change (X) Addition
Name: AUSTIN, ALISON D
Address: 6161 NW 9TH AVENUE
City-St-Zip: MIAMI, FL 33127

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: ALISON D AUSTIN

CEO

02/02/2009

Electronic Signature of Signing Officer or Director

Date