## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 726862** 

FILED May 09, 2009 Secretary of State

Current P	Principal Place of Business:	New Principal Place of Business:	
	DE MORRIS BLVD. ANGE, FL 321194104		
Current N	failing Address:	New Mailing Address:	
	DE MORRIS BLVD. ANGE, FL 321194104		
n accordar	r: 59-6548893 FEI Number Applied For ( ) noe with s. 607.193(2)(b), F.S., the corporation did Address of Current Registered Agent:		etatus Desired ( )
	NECT C		
5963 PAR	K RIDGE DRIVE ANGE, FL 32127 US		
PORT OR	K RIDGE DRIVE ANGE, FL 32127 US	purpose of changing its registered office or registe	ered agent, or both,
5963 PAR PORT OR The above n the Stat	K RIDGE DRIVE ANGE, FL 32127 US e named entity submits this statement for the e of Florida.	purpose of changing its registered office or registe	ered agent, or both,
5963 PAR PORT OR The above n the Stat	K RIDGE DRIVE ANGE, FL 32127 US e named entity submits this statement for the e of Florida.		ered agent, or both,
5963 PAR PORT OR The above n the Stat SIGNATU	K RIDGE DRIVE ANGE, FL 32127 US e named entity submits this statement for the e of Florida. RE:		
5963 PAR PORT OR The above n the Stat BIGNATU	K RIDGE DRIVE ANGE, FL 32127 US e named entity submits this statement for the e of Florida.  RE:  Electronic Signature of Registered A	gent Date	S AND DIRECTO
5963 PAR PORT OR The above In the Stat BIGNATU  DFFICER Itle: Itame: Address:	K RIDGE DRIVE PANGE, FL 32127 US  e named entity submits this statement for the e of Florida.  RE: Electronic Signature of Registered A  S AND DIRECTORS:  T () Delete BOYD, GRACE 3242 LAPALOMA AVE	gent Date  ADDITIONS/CHANGES TO OFFICER  Title: ( ) Change ( ) Addi Name: Address:	S AND DIRECTOI

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: DIANNE JOHNS D 05/09/2009