## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 739933** 

City-St-Zip:

JOLIET, IL 60435

VALGO ASSOCIATION INC.

FILED Apr 27, 2009 Secretary of State

Entity Nai	me: VALGO A	SSOCIATION, INC.				
Current P	rincipal Place	of Business:	New Principal Place of Business:			
310 PEAR SARASOT	L AVE A, FL 34243	US				
Current M	lailing Addres	s:	New Mailing Address:			
310 PEAR SARASOT	L AVE A, FL 34243	US				
FEI Number	: 59-1813392	FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired (	)	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
310 PEAR	RMANAGEMEN LAVE A, FL 34243	NT US				
	named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or	both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	FISCHER, DIAN	JISTADOR PKWY #139	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	MEE, LAURA	Delete UISTADOR PKWY #138 'L 34210	Title: Name: Address: City-St-Zip:	STD (X) Change ( ) Addition MEE, LAURA 3500 EL CONQUISTADOR PKWY #138 BRADENTON, FL 34210		
Title: Name: Address: City-St-Zip:	CARLIN, VINCÉ	JISTADOR PKWY #136	Title: Name: Address: City-St-Zip:	VPD (X) Change ( ) Addition CARLIN, VINCENT 3500 EL CONQUISTADOR PKWY #136 BRADENTON, FL 34210		
Title: Name: Address: City-St-Zip:	PLASTER, THO	JISTADOR PKWY #152	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address:	D () BLOCK, GEORG 1007 BUELL AV		Title: Name: Address:	() Change () Addition		

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.

City-St-Zip:

SIGNATURE: DIANE FISHER P 04/27/2009