## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000007028

FILED Feb 13, 2009 Secretary of State

Entity Name: UNITED CONSUMER AWARENESS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

15707 COIT ROAD 160 EILEEN WAY SUITE 121 SYOSSET, NY 11791 DALLAS, TX 75248

**New Mailing Address: Current Mailing Address:** 

15707 COIT ROAD 160 EILEEN WAY SUITE 121 SYOSSET, NY 11791 DALLAS, TX 75248

FEI Number: 43-1727979 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

FULKS, JOSHUA FULKS, JOSHUA Name: Name: 10801 NANTUCKET DR. Address: 10801 NANTUCKET DR. Address: City-St-Zip: ROWLETT, TX 75089 City-St-Zip: ROWLETT, TX 75089

Title: VCP () Delete Title: PR/S (X) Change ( ) Addition

Name: GOW, JUSTIN Name: FORCE, THOMAS Address: 4432 WINDSWORTH DR. Address: 5 BRYANS CT City-St-Zip: PLANO, TX 75093 City-St-Zip: WEST ISLIP, NY 11795

Title: () Delete Title: (X) Change ( ) Addition WOELKE, VERNON BRADFORD, BRITTON Name: Name:

1415 SNOWBERRY DRIVE Address: 5800 LANGSFORD LANE Address:

City-St-Zip: COLLEYVILLE, TX 76034 City-St-Zip: ALLEN, TX 75013

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: THOMAS FORCE, ESQ. PR 02/13/2009