

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000216

FILED
Apr 23, 2009
Secretary of State

Entity Name: SUPPORT THE POOR, INCORPORATED

Current Principal Place of Business:

6103 TURNABOUT LN #11
COLUMBIA, MD 21044

New Principal Place of Business:

6158 STEVENS FOREST RD
COLUMBIA, MD 21045

Current Mailing Address:

PO BOX 80
CLARKSVILLE, MD 21029

New Mailing Address:

FEI Number: 86-1177414 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MLAY, MARK
407 S 33RD ST
FORT PIERCE, FL 34942 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: P () Delete
Name: WANDIA, MARY J
Address: 6103 TURNABOUT LN #11
City-St-Zip: COLUMBIA, MD 21044

Title: S () Delete
Name: WAMUKOYA, MARGARET
Address: 6103 TURNABOUT LN #11
City-St-Zip: COLUMBIA, MD 21044

Title: T () Delete
Name: THERI, JANE
Address: 6103 TURNABOUT LN #11
City-St-Zip: COLUMBIA, MD 21044

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WANDIA, MARY J
Address: 6158 STEVENS FOREST RD
City-St-Zip: COLUMBIA, MD 21045

Title: S (X) Change () Addition
Name: WAMUKOYA, MARGARET
Address: 6158 STEVENS FOREST RD
City-St-Zip: COLUMBIA, MD 21045

Title: T (X) Change () Addition
Name: THERI, JANE
Address: 6158 STEVENS FOREST RD
City-St-Zip: COLUMBIA, MD 21045

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: MARY J WANDIA

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date