

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000004530

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** CHANGING WAYS ASSOCIATION INC.

**Current Principal Place of Business:**

402 S BABCOCK ST SUITE B  
MELBOURNE, FL 32901

**New Principal Place of Business:**

830 WICKHAM LAKES DRIVE  
MELBOURNE, FL 32940 US

**Current Mailing Address:**

PO BOX 2746  
MELBOURNE, FL 329022746

**New Mailing Address:**

PO BOX 2746  
MELBOURNE, FL 32902 US

**FEI Number:** 11-3314704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WAKA, KENNETH S  
402 S BABCOCK ST SUITE B  
MELBOURNE, FL 32901 US

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

WAKA, KENNETH S  
830 WICKHAM LAKES DRIVE  
MELBOURNE, FL 32940 US

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: \_\_\_\_\_

04/21/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: WAKA, KENNETH S  
Address: 830 WICKHAM LAKES DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: VCVF  
Name: KALES, DONALD  
Address: 14352 COLONIAL GRAND BLVD., SUITE 2505  
City-St-Zip: ORLANDO, FL 32837 US

Title: DST  
Name: WAKA, EVELYN  
Address: 830 WICKHAM LAKES DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

I hereby 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 all other like empowered.

SIGNATURE: KENNETH S. WAKA, PRES.

CP

04/21/2010

Electronic Signature of Signing Officer or Director

Date