

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000743

FILED
Apr 17, 2009
Secretary of State

Entity Name: WORLD EMERGENCY RELIEF, INC.

Current Principal Place of Business:

2270 CAMINO VIDA ROBLE
STE. K
CARLSBAD, CA 92011 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 131570
CARLSBAD, CA 92013 US

New Mailing Address:

FEI Number: 95-4014743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION INFORMATION SERVICES, INC.
% PRENTICE HALL
TALLAHASSEE, FL 32301 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: CD () Delete
Name: DUZIK, MARK REV.
Address: 1205 WEST CYPRESS #29
City-St-Zip: SAN DIMAS, CA 91775

Title: PD () Delete
Name: MACCOLLAM, JOEL DR.
Address: 2532 ABEDUL STREET
City-St-Zip: CARLSBAD, CA 92009

Title: TD () Delete
Name: BATARSEH, MICHAEL
Address: 8860 WHEATLAND AVE
City-St-Zip: SUN VALLEY, CA 91352

Title: D () Delete
Name: BECKS, GARY
Address: 864 NORTH 2ND ST. #340
City-St-Zip: EL CAJON, CA 92021

Title: D () Delete
Name: DICKSON, SCOTT
Address: 609 HIDDEN CANYON WAY
City-St-Zip: OCEANSIDE, CA 92054

Title: SD () Delete
Name: REIBER, PEGGY
Address: 1910 ODELL CIRCLE
City-St-Zip: VISTA, CA 92084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: BECKS, GARY
Address: 864 NORTH 2ND ST. #340
City-St-Zip: EL CAJON, CA 92021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: REIBER, PEGGY
Address: 1910 ODELL CIRCLE
City-St-Zip: VISTA, CA 92084

Title: D (X) Change () Addition
Name: FALKENTHAL, GAYLE
Address: 11702 PICKFORD ROAD
City-St-Zip: SAN DIEGO, CA 92131

Title: D (X) Change () Addition
Name: SCHROEDER, ROBERT
Address: 440 NORTH PACIFIC #120
City-St-Zip: OCEANSIDE, CA 92054

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: PEGGY REIBER

SD

04/17/2009

Electronic Signature of Signing Officer or Director

Date