

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000784

FILED
Aug 07, 2009
Secretary of State

Entity Name: HAVANA COMMUNITY TECHNOLOGY & LEARNING CENTER, INC.

Current Principal Place of Business:

7858 HAVANA HWY
HAVANA, FL 32333 US

New Principal Place of Business:

Current Mailing Address:

7858 HAVANA HWY
HAVANA, FL 32333 US

New Mailing Address:

P O BOX 2395
HAVANA, FL 32333 US

FEI Number: 73-1685676 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BEARE, NIKKI
7858 HAVANA HWY
HAVANA, FL 32333 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: PDS () Delete
Name: JOHNSON, LILLIAN
Address: 7858 HAVANA HWY
City-St-Zip: HAVANA, FL 32333 US

Title: VPT () Delete
Name: BEARE, NIKKI
Address: 7858 HAVANA HWY
City-St-Zip: HAVANA, FL 32333 US

Title: D () Delete
Name: BROWN, CRAIG
Address: 7858 HAVANA HWY
City-St-Zip: HAVANA, FL 32333 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LILLIAN JOHNSON

PDS

08/07/2009

Electronic Signature of Signing Officer or Director

Date