

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004481

FILED  
Mar 25, 2009  
Secretary of State

**Entity Name:** OUR FATHERS CLOSET TOO, INC.

**Current Principal Place of Business:**

1645 E NEW YORK AVE  
DELAND, FL

**New Principal Place of Business:**

**Current Mailing Address:**

1645 E NEW YORK AVE  
DELAND, FL

**New Mailing Address:**

**FEI Number:** 59-3509075

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MONSEUR, NEIL  
1645 E NY AVENUE  
DELAND, FL 32724 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: MONSEUR, NEIL  
Address: PO BOX 781  
City-St-Zip: DELAND, FL 32721

Title: VS ( ) Delete  
Name: MONSEUR, MARGARET  
Address: PO BOX 781  
City-St-Zip: DELAND, FL 32721

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: NEIL MONSEUR

P

03/25/2009

Electronic Signature of Signing Officer or Director

Date