2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004708

Entity Name: PFLAG, VERO BEACH CHAPTER, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1425 56TH SQ WEST VERO BEACH, FL 32966

Current Mailing Address: New Mailing Address:

PO BOX 650533 VERO BEACH, FL 32965

FEI Number: 65-1014684 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BURNS, CARL

1425-56TH SQUARE W.

1425-56TH SQ WEST

VEDO BEACH EL 220602207 LIS

VEDO BEACH EL 220602207 LIS

VERO BEACH, FL 329662397 US VERO BEACH, FL 329662397 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: CARL W. BURNS 04/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: () Change () Addition

 Name:
 GOODWIN, SUE
 Name:

 Address:
 3175 1ST RD
 Address:

 City-St-Zip:
 VERO BEACH, FL 32968
 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition Name: OWENS, DANA Name: OWENS, DANA

 Name:
 OWENS, DANA
 Name:
 OWENS, DANA

 Address:
 1630-20TH COURT SW
 Address:
 861 46TH AVENUE

 City-St-Zip:
 VERO BEACH, FL 32962
 City-St-Zip:
 VERO BEACH, FL 32966

Title: S () Delete Title: S (X) Change () Addition

 Name:
 O'MALLEY, MICHAEL
 Name:
 CORDOVA, LOU

 Address:
 2110-87 AVE
 Address:
 3535 13TH STREET

 City-St-Zip:
 VERO BEACH, FL 32969
 City-St-Zip:
 VERO BEACH, FL 32960

Title: TD () Delete Title: () Change () Addition

 Name:
 BURNS, CARL
 Name:

 Address:
 1425-56TH SQUARE W.
 Address:

 City-St-Zip:
 VERO BEACH, FL 329662397
 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: CARL W. BURNS TD 04/16/2009