

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005177

FILED
May 08, 2009
Secretary of State

Entity Name: SOTERIA INTERNATIONAL FOUNDATION, INC.

Current Principal Place of Business:

7950 NW 155 ST SUITE 207
MIAMI LAKES, FL 3016

New Principal Place of Business:

Current Mailing Address:

7950 NW 155 ST SUITE 207
MIAMI LAKES, FL 33016

New Mailing Address:

7950 NW 155 ST SUITE 207
MIAMI LAKES, FL 3016

FEI Number: 65-0950804 **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:

GREEN, LACOUNT J
2872 S. CAMBRIDGE LANE
COOPER CITY, FL 33026 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: CEO () Delete
Name: THOMAS, HUGH
Address: 2350 CUMBERLAND DRIVE
City-St-Zip: MONTERREY, TN 38574

Title: PD () Delete
Name: GREEN, LACOUNT J
Address: 2872 SOUTH CAMBRIDGE LANE
City-St-Zip: COOPER CITY, FL 33026

Title: DIR () Delete
Name: RILEY, CURTIS
Address: 18321 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: DIR () Delete
Name: HARRELL, JOHN
Address: 16801 SW 62ND STREET
City-St-Zip: FT. LAUDERDALE, FL 33331

Title: DIR () Delete
Name: DIEGUEZ, ANTHONY
Address: 7220 POINCIANA COURT
City-St-Zip: MIAMI LAKES, FL 33014

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:

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: LACOUNT J GREEN

PD

05/08/2009

Electronic Signature of Signing Officer or Director

Date