

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 13, 2009
Secretary of State**

DOCUMENT# N00000007807

Entity Name: AFTER THAT, INC.

Current Principal Place of Business:

3807 14TH STREET W
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

3807 14TH STREET W
LEHIGH ACRES, FL 33971

New Mailing Address:

FEI Number: 65-1042947 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:

MCINTOSH, HELEN L
3807 14TH ST W
LEHIGH ACRES, FL 33971 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: VD () Delete
Name: MCINTOSH, CORRIS L SR.
Address: 3807 14TH ST W
City-St-Zip: LEHIGH ACRES, FL 33971

Title: PD () Delete
Name: MCINTOSH, HELEN L
Address: 3807 14TH STREET W
City-St-Zip: LEHIGH ACRES, FL 33971

Title: D () Delete
Name: MCKINNEY, ANGELA
Address: 383 OTTUMWA AVE
City-St-Zip: FT MYERS, FL 33975

Title: D () Delete
Name: BATES, ANTIONETTE
Address: 506 HENRY AVENUE
City-St-Zip: LEHIGH ACRES, FL 33936

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:

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: HELEN MCINTOSH

Electronic Signature of Signing Officer or Director

MRS.

06/13/2009

Date