2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008418

FILED Mar 05, 2009 Secretary of State

Entity Name: THE FELLSMERE COMMUNITY ENRICHMENT PROGRAM, INC.

Current Principal Place of Business: New Principal Place of Business: 10074 ESPERANZA CIR FELLSMERE, FL 32948 **Current Mailing Address: New Mailing Address:** 10074 ESPERANZA CIRCLE FELLSMERE, FL 32948 FEI Number: 59-3690997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FELLSMERE COMMUNITY ENRICHMENT PROG. 10074 ESPERANZA CIR FELLSMERE, FL 32948 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete LEET, HOPE C LEET, HOPE C PRES Name: Name: 210 INDIAN RIVER DR. Address: 210 INDIAN RIVER DR. Address: City-St-Zip: VERO BCH, FL 32963 City-St-Zip: VERO BCH, FL 32963 Title: Title: (X) Change () Addition () Delete FISHER, JOSEPH Name: FISHER, JOSEPH V.P. Name: Address: 4338 COLLINGTREE DRIVE Address: 4338 COLLINGTREE DRIVE City-St-Zip: VIERA, FL 32955 City-St-Zip: VIERA, FL 32955 Title: () Delete Title: (X) Change () Addition JAN, SIMBERLUND LEET, HARRY G SECT Name: Name: 210 INDIAN RIVER DRIVE Address: 1B VENETIAN WAY Address: City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 City-St-Zip: VERO BEACH, FL 32963 Title: () Delete Title: (X) Change () Addition Name: LEET, HARRY G Name: BROWN, ANNAMAE DIR 210 INDIAN RIVER DR 1050 VERNON STREET Address: Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: FELLSMERE, FL 32948 Title: () Delete Title: (X) Change () Addition SARAH, SAVAGE MITCHELL, BETH DIR Name: Name: 235 SOUTH HICKORY ST. 700 MAIN STREET Address: Address: City-St-Zip: FELLSMERE, FL 32948 City-St-Zip: SEBASTIAN, FL 32958 Title: () Delete Title: () Change () Addition HUBBARD, LOUISE Name: Name: Address: 2525 ST. LUCIE AVENUE Address: VERO BEACH, FL 32960 City-St-Zip: 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: HOPE C. LEET PRES 03/05/2009