2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# N01000000390

Entity Name: THE AMERICAN FOUNDATION FOR HUNGARIAN YOUTH AND CULTURE, INC.

Current Principal Place of Business:

1919 PRINCESS CT
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

1919 PRINCESS CT
NAPLES, FL 34110

New Mailing Address:

FEI Number: 59-3693576 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

EVVA, ANDREW S
1919 PRINCESS CT
NAPLES, FL 341101018 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:	DP	( ) Delete
Name:	EVVA, ANDREW S	
Address:	1919 PRINCESS CT	
City-St-Zip:	NAPLES, FL 34110	
Title:	DS	( ) Delete
Name:	EVVA, PHYLLIS S	
Address:	1919 PRINCESS CT	
City-St-Zip:	NAPLES, FL 34110	
Title:	D	( ) Delete
Name:	EVVA, MICHELLE	
Address:	16130 HURON ST	
City-St-Zip:	CREST HILL, IL 60435	
Title:	DT	( ) Delete
Name:	PETERSON, JOHN V	
Address:	13024 POND APPLE DR	
City-St-Zip:	NAPLES, FL 34119	
Title:	DAT	( ) Delete
Name:	SOMOGYI, GABOR	
Address:	H-1122 BUDAPEST VAROSMAJOR U.7	
City-St-Zip:	HUNGARY,	

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: ANDREW S. EVVA DP 01/15/2009

Electronic Signature of Signing Officer or Director — Date