

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001563

FILED
Feb 22, 2009
Secretary of State

Entity Name: FLORIDA STATE SPANISH CONFERENCE, INC.

Current Principal Place of Business:

10043 N W 13 AVE
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

10043 N W 13 AVE
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 59-3748120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAEDO, MERUCHY
10043 N W 13 AVE
GAINESVILLE, FL 32606 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: HAEDO, MERUCHY
Address: 10043 NW 13TH AVE
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: CARMONA, ANA
Address: 255 SUNCREST COURT
City-St-Zip: OVIEDO, FL 32765

Title: DT () Delete
Name: AVENDANO, ALEJANDRO
Address: 10043 NW 13TH AVE
City-St-Zip: GAINESVILLE, FL 32606

Title: DVS () Delete
Name: JOURNEY, ANA
Address: 1618 SW 75TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: LILARD, LOUIS
Address: 2004 CLIPPER COURT
City-St-Zip: LA BELLE, FL 33935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: MARTYNY, GUDRUN
Address: 2615 SILVER RIVER TR
City-St-Zip: ORLANDO, FL 32828

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: JOURNEY, ANA
Address: 1618 SW 75TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

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: MERUCHY HAEDO

DP

02/22/2009

Electronic Signature of Signing Officer or Director

Date