2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2009
Secretary of State

DOCUMENT# N01000003849

Entity Name: CENTRE OF TRANSFORMATION, INC.

Current Principal Place of Business:

2925 S.W. 22 AVE.
202
DELRAY BEACH, FL 33445

New Principal Place of Business:

351 W, HULLSBORO BLVD.
303
DEERFIELD BEACH, FL 33441

Current Mailing Address:

P.O. BOX 7354
DELRAY BEACH, FL 33482

New Mailing Address:

555 KIRK ROAD
A-209
PALM SPRINGS, FL 33461

FEI Number: 65-1053601 **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:

SAPP, BONNIE
2925 S.W. 22 AVE.
202
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

SAPP, BONNIE L
555
202
PALM SPRINGS, FL 33461 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: BONNIE L. SAPP 09/02/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SAPP, BONNIE
Address: 2925 S.W. 22 AVE APT. 202
City-St-Zip: DELRAY BEACH, FL 33445

Title: SEC ( ) Delete
Name: SMITH, LINDA
Address: 1631 NORTH CYPRESS ROAD
City-St-Zip: POMPANO BEACH, FL 33060

Title: TD ( ) Delete
Name: WILSON, EUNICE
Address: 3286 NW 41ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SAPP, BONNIE L
Address: 555 KIRK ROAD
City-St-Zip: PALM SPRINGS, FL 33461

Title: SEC (X) Change ( ) Addition
Name: SMITH, LINDA
Address: 70 S,E. 11 STREET BLDG. A APT.2
City-St-Zip: BOCA RATON, FL 33432

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: BONNIE L. SAPP D 09/02/2009
Electronic Signature of Signing Officer or Director — Date