2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005331

FILED Apr 30, 2009 Secretary of State

Current F	Principal Place	e of Business:	New Principal Plac	ce of Business:
	STREET NVILLE, FL 322	206		
Current Mailing Address:		New Mailing Address:		
	K AVENUE PARK, FL 320	073		
El Numbe	r: 59-3733842	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame an	d Address of (Current Registered Agent:	Name and Address of New Registered Agent:	
\/II I A K # G	TEDEO A EL	A N /		
617 ROV	S, TERESA EL/ VE AVE NVILLE, FL 322			
617 RON ACKSON The above	ÝE AVE IVILLE, FL 322	208 US	e purpose of changing its registe	ered office or registered agent, or both
617 RON ACKSON The above In the Stat	VE AVE NVILLE, FL 322 e named entity e of Florida. RE:	208 US submits this statement for the		ered office or registered agent, or both
617 ROV ACKSON the above the Stat	VE AVE NVILLE, FL 322 e named entity e of Florida. RE:	208 US		ered office or registered agent, or both Date
617 RON ACKSON The above the State	VE AVE NVILLE, FL 322 e named entity e of Florida. RE:	208 US submits this statement for the	gent	
617 RON ACKSON The above the State	VE AVE NVILLE, FL 322 e named entity e of Florida. RE: Electroi	submits this statement for the nic Signature of Registered Actors:) Delete S VE.	gent	Date
617 RONACKSON The above The above The State SIGNATU DFFICER title: ame: ddress:	VE AVE NVILLE, FL 32: e named entity e of Florida. RE: Electroi S AND DIRECT DP (SIPLIN, LEWIS 1617 ROWE A JACKSONVILL	submits this statement for the nic Signature of Registered Actors:) Delete S VE. E, FL 32208) Delete	gent ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: DAY, JAN Address: 2153 BR	Date GES TO OFFICERS AND DIRECTO () Change () Addition (X) Change () Addition

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: JAMES DAY D 04/30/2009