2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005751

FILED Feb 27, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	TY SCANY WAY SPRINGS, FL	34134		
Current Mailing Address:		New Mailing Address:		
	TY SCANY WAY SPRINGS, FL	34134		
El Number	: 03-0472358	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
	EVEN M LPA			
ROETZEL IAPLES, The above In the State	SHORE DRIV. & ANDRESS FL 34103 US named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both
ROETZEL IAPLES, The above	SHORE DRIV. & ANDRESS FL 34103 US e named entity e of Florida. RE:			ed office or registered agent, or both Date
ROETZEL JAPLES, The above In the State	SHORE DRIV. & ANDRESS FL 34103 US e named entity e of Florida. RE:	submits this statement for the	gent	
ROETZEL JAPLES, The above In the State	SHORE DRIV. & ANDRESS FL 34103 US e named entity e of Florida. RE: Electror S AND DIRECTORY OUVERSON, T	submits this statement for the nic Signature of Registered Actions: TORS: Delete HOMAS H BAY BLVD. #300	gent	Date
ROETZEL JAPLES, The above the State SIGNATUI DFFICER title: ame: ddress:	SHORE DRIV. & ANDRESS FL 34103 US e named entity e of Florida. RE: Electror S AND DIRECT D (OUVERSON, T 5801 PELICAN NAPLES, FL 3	submits this statement for the nic Signature of Registered Actions: Delete HOMAS H BAY BLVD. #300 41082709 Delete JR G JY WAY	gent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: ARTHUR CARTY DIR 02/27/2009