2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003450

Apr 17, 2009 Secretary of State

Entity Name: KARDECIAN STUDY SOCIETY OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

238 N W 12 AVE 254 N W 12 AVE

DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442

Current Mailing Address: New Mailing Address:

254 N W 12 AVE 238 N W 12 AVE

DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442

FEI Number: 03-0437640 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:

FERNANDES, RAMATIS FERNANDES, RAMATIS 238 N W 12 AVE 254 N W 12 AVE

DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 US 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: FERNANDES RAMATIS 04/17/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FERNANDES, RAMATIS FERNANDES, RAMATIS Name: Name: 1920-K LINTON LAKE DR. Address: 7186 SHADY GROVE LANE Address:

City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: BOYTON BEACH, FL 33436

Title: () Delete Title: () Change () Addition

Name: DA SILVA, JOSE Name: Address: 23395 CAROLWOOD LANE 4204 Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip:

Title: () Delete Title: () Change () Addition

ROMANO, GERALDO Name: Name: 7525 NW 61 TERRACE - UNIT 2902 Address: Address: City-St-Zip: POMPANO BEACH, FL 33067 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: RAMATIS FERNANDES PD 04/17/2009