2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2009
Secretary of State

DOCUMENT# N02000004341

Entity Name: DO THE RIGHT THING OF TEMPLE TERRACE, INC.

Current Principal Place of Business:

11250 NORTH 56TH STREET
TEMPLE TERRACE, FL 33617

New Principal Place of Business:

Current Mailing Address:

11250 NORTH 56TH STREET
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: 02-0548002 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

WALTER, KAREN
11250 N 56TH ST
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

WALTER, KAREN
11250 N 56TH ST
TEMPLE TERRACE, FL 33617 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: _____ 05/12/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: VELONG, A.L.
Address: 11250 NORTH 56TH STREET
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete
Name: AVARI-COOPER, CARL
Address: 11250 NORTH 56TH STREET
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete
Name: WALTER, KAREN
Address: 11250 NORTH 56TH STREET
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete
Name: SANTANA, MANUEL
Address: 11250 NORTH 56TH STREET
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ALBANO, KENNETH R
Address: 11250 NORTH 56TH STREET
City-St-Zip: TEMPLE TERRACE, FL 33617

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

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

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: KAREN WALTER D 05/12/2009
Electronic Signature of Signing Officer or Director — Date