2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 17, 2008
Secretary of State

DOCUMENT# N02000007053

Entity Name: AMERICAN FOUNDATION LIBERTY & DEMOCRACY, INC.

Current Principal Place of Business:

6505 EMERALD DUNES DR.
102
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

6505 EMERALD DUNES DR.
102
WEST PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 33-1022007 **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:

SALAZAR, GONZALO
330 CRESTWOOD CIRCLE
302
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SALAZAR, GONZALO
Address: 330 CRESTWOOD CR. APT. 302
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VD ( ) Delete
Name: THALHEIMER, MARIA
Address: 6505 EMERALD DUNES DR. SUITE 102
City-St-Zip: WEST PALM BEACH, FL 33411

Title: SD ( ) Delete
Name: SALAZAR, ROXANA
Address: 6505 EMERALD DUNES DR. SUITE 102
City-St-Zip: WEST PALM BEACH, FL 33411

Title: TS ( ) Delete
Name: LOVERA, VICTOR
Address: 6505 EMERALSD DUNES DR. SUITE 102
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: THALHEIMER, MARIA
Address: 6505 EMERALD DUNES DR. SUITE 102
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VD (X) Change ( ) Addition
Name: SALAZAR, ROXANA
Address: 6505 EMERALD DUNES DR. SUITE 102
City-St-Zip: WEST PALM BEACH, FL 33411

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: GONZALO SALAZAR PD 07/17/2008
Electronic Signature of Signing Officer or Director — Date