

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008481

FILED
Apr 15, 2009
Secretary of State

Entity Name: AVEJAX (VENEZUELAN-AMERICAN ASSOCIATION OF JACKSONVILLE), INC.

Current Principal Place of Business:

1465 SWAN LANE
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

2700 OAK HAVEN DR
MIDDLEBURG, FL 32068 US

Current Mailing Address:

1465 SWAN LANE
JACKSONVILLE, FL 32207 US

New Mailing Address:

2700 OAK HAVEN DR
MIDDLEBURG, FL 32068 US

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

Name and Address of Current Registered Agent:

MORA, GUILLERMO
1465 SWAN LANE
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

BLANDIN, PIEDAD
2700 OAK HAVEN DR
MIDDLEBURG, FL 32068 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: FCASTEJON

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORA, GUILLERMO
Address: 1465 SWAN LANE
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: VP () Delete
Name: URDANETA, RAFAEL
Address: 4449 TIMBER HALLOW WAY
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: S () Delete
Name: MCKENZIE, LILLEIRA
Address: 2320 OAKDELE DR. EAST
City-St-Zip: JACKSONVILLE, FL 32073 US

Title: T (X) Delete
Name: JOSE, ARTIGAS R TREASUR
Address: 9645 OLD BAYMEADOWS RD. APT. 741
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLANDIN, PIEDAD PRESIDE
Address: 2700 OAK HAVEN DR
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: TR (X) Change () Addition
Name: CASTEJON, FRANCISCO I TREASUR
Address: 2190 TREASURE POINT RD
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: S (X) Change () Addition
Name: MCKENZIE, LILLEIRA SECA
Address: 2320 OAKDELE DR. EAST
City-St-Zip: JACKSONVILLE, FL 32073 US

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: FCASTEJON

TREA

04/15/2009

Electronic Signature of Signing Officer or Director

Date