

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001122

FILED
Feb 22, 2009
Secretary of State

Entity Name: UNITED C.B'ERS OF FLORIDA, INC.

Current Principal Place of Business:

550 N.W. 30TH TERRACE
FORT LAUDERDALE, FL 333117642

New Principal Place of Business:

Current Mailing Address:

550 N.W. 30TH TERRACE
FORT LAUDERDALE, FL 333117642

New Mailing Address:

FEI Number: 11-3672029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRAY-KNIGHT, GLORIA
550 N.W. 30TH TERRACE
FORT LAUDERDALE, FL 333117642 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: HALL, JOHN
Address: 6349 NW 22ND COURT
City-St-Zip: MARGATE, FL 330636928

Title: TD () Delete
Name: KNIGHT, GLORIA GRAY
Address: 550 N.W. 30TH TERRACE
City-St-Zip: FORT LAUDERDALE, FL 333117642

Title: D () Delete
Name: WILEY, VONDELL
Address: 601 NW 18TH CT
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: HALL, LILLY
Address: 6347 NW 22ND COURT
City-St-Zip: MARGATE, FL 330636928

Title: S () Delete
Name: ADDISON, SONYA
Address: 601 NW 18TH CT
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP () Delete
Name: WILEY, KENNETH
Address: 555 NW 29TH TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: S (X) Change () Addition
Name: KNIGHT, GLORIA
Address: 550 NW 30TH TERRACE
City-St-Zip: FORT LAUDERDALE,, FL 333117642

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: GLORIA GRAY KNIGHT

S/D

02/22/2009

Electronic Signature of Signing Officer or Director

_____ Date