2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003111

FILED Apr 28, 2009 Secretary of State

Entity Name: THE FLORIDA FAMILY NETWORK, INC.

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
400 GAITI TALLAHA	HER DR ASSEE, FL 323	05			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
P.O. BOX TALLAHA	(6129 ASSEE, FL 323	14			
FEI Numbe	r: 41-2091332	FEI Number Applied For (FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of (Current Registered Agen	t: Name and Addres	s of New Registered Agent:	
FINCH, S 400 GAITI TALLAHA		05 US			
	e named entity te of Florida.	submits this statement for	the purpose of changing its regist	ered office or registered agent, or both,	
SIGNATU	JRE:				
	Electron	nic Signature of Registere	l Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	FINCH, SOKOY 400 GAITHER	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (WESSOR, KHU 608 HAMPTON TALLAHASSEE	IDR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LEWIS, KENDI 1125 SW 123F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (THOMAS, ANN 2901 PAR LAN TALLAHASSEE	E	Address: 2466 W	(X) Change()Addition LANDRY ATTLE TREE ROAD EAST DNVILLE, FL 32246	
Title: Name: Address: City-St-Zip:	D (WORTHEN, DF 2280 KIMBERI TALLAHASSEE	_Y LANE		(X) Change () Addition JAMES LAKE TERRACE AR, FL 33023	
Title: Name:	D (BRYANT, JENE 9789 JOHN FR) Delete ELL	Title: Name: Address:	() Change () Addition	

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: SOKOYA FINCH DIR 04/28/2009



N03000003111 May 15, 2009 4/28/09

Division of Corporations Florida Department of State P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Please add the following Board of Directors onto the Florida Family Network (Document Number- N0300000311) Annual Report. When I applied online, (April 28, 2009) there was a limited amount of space for directors. The additional Board of Directors are:

- Williams, Larry 3916 Rose Petal Lane Orlando, FL 32808
- 2. Hinson, Gerald 203 Lincoln Street Tallahassee, FL 32301
- 3. Lloyd, Deborah 316 E. Virginia Street Tallahassee, FL 32301

Thank you,

Sokoya Finch Registered Agent

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Florida Family Network - P.O. Box 6129 - Tallahassee, Fl 32314 - 850-580-3526P - 850-580-2125F