

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007056

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** MOTHERS AGAINST MURDERERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1221 W 23RD ST  
RIVIERA BCH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1221 W 23RD ST  
RIVIERA BCH, FL 33404

**New Mailing Address:**

**FEI Number:** 13-4257073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TIPTON, TOMMY  
931 VILLAGE BLVD 905  
W PALM BCH, FL 33409 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: P ( ) Delete  
Name: WILLIAMS, ANGELA  
Address: 1221 W 23RD ST  
City-St-Zip: RIVIERA BCH, FL 33404

Title: V ( ) Delete  
Name: WILLIAMS, ARTIE  
Address: 1221 W 23RD ST  
City-St-Zip: RIVIERA BCH, FL 33404

Title: T ( ) Delete  
Name: WILLIAMS, JIMMIE  
Address: 1221 W 23RD ST  
City-St-Zip: RIVIERA BCH, FL 33404

Title: S ( ) Delete  
Name: DIXON, GEORGIE  
Address: 2527 S CANTBURY DR  
City-St-Zip: W PALM BCH, FL 33407

**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:

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: GEORGIE DIXON

S

04/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date