

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009930

FILED
Jul 11, 2009
Secretary of State

Entity Name: THE LIBERIAN COMMUNITIES OF FLORIDA, INC.

Current Principal Place of Business:

526 TUSCANNY PARK LOOP
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

526 TUSCANNY PARK LOOP
BRANDON, FL 33511

New Mailing Address:

FEI Number: 05-0589782 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

SEKAJIPO, LAWRENCE D
526 TUSCANNY PARK LOOP
BRANDON, FL 33511 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: S () Delete
Name: WILLIAMS, AMY
Address: 6603 CONSTANCE ST
City-St-Zip: LAKE WORTH, FL 33467

Title: C () Delete
Name: DANIELS, GENEVIE
Address: 6111 WASHINGTON ST, # 234
City-St-Zip: HOLLYWOOD, FL 33023

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CHR () Change (X) Addition
Name: SWANN, VICTORIA
Address: 2621 FOREST RUN COURT
City-St-Zip: CLEARWATER, FL 33761

Title: VC () Change (X) Addition
Name: LOIDY, JONES
Address: 526 TUSCANNY PARK LOOP
City-St-Zip: BRANDON, FL 33511

Title: FS () Change (X) Addition
Name: DOMINIQUE, YANFORE
Address: 526 TUSCANNY PARK LOOP
City-St-Zip: BRANDON, FL 33511

Title: TREA () Change (X) Addition
Name: JOE, YANKOON
Address: P O BOX 8471
City-St-Zip: FT LAUDERDALE, FL 33310

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: LAWRENCE D. SEKAJIPO

MGR

07/11/2009

Electronic Signature of Signing Officer or Director

Date