2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010845

3419 E. HENRY AVENUE

TAMPA, FL 33610

Address:

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

DOCON	Secretary of State									
Entity Nar	ne: MALA	CHI FOUNDATIC	N CORP.							
Current Principal Place of Business:				Nev	New Principal Place of Business:					
3419 E HE TAMPA, FI										
Current Mailing Address:				New Mailing Address:						
3419 E HE TAMPA, FI	NRY AVEN _ 33610	IUE								
FEI Number: 34-1647226 FEI Number Applied For ()			FEI Number Not Applicable ()			Certific	Certificate of Status Desired ()			
Name and	Address	of Current Regis	tered Agent:	Nar	ne and	Addres	s of New Re	gistered A	gent:	
TAMPA, Fi	ENRY AVEI _ 33610	US ity submits this st	atement for the p	urpose of cha	anging i	ts registe	ered office or	registered	agent, or both,	
SIGNATUR										
		tronic Signature c	f Registered Age	nt				Date		
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	DPS HANNER, J 3419 E. HE TAMPA, FL	NRY AVENUE					()Change	() Addition		
Title: Name: Address: City-St-Zip:	DV PERKINS, 9 6009 NORT TAMPA, FL					3419 EA	(X) Change S, SHALONDA ST HENRY AVE FL 33610	() Addition		
Title: Name:	D WILBURN,	(X) Delete JIMMY L JR		Title Nam			() 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.

Address:

City-St-Zip:

SIGNATURE: JEFFREY HANNER P 04/30/2009