

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004347

FILED  
Feb 25, 2009  
Secretary of State

**Entity Name:** VOLUNTEERS WITHOUT BOUNDARIES, INC.

**Current Principal Place of Business:**

2620 S. PENINSULA DRIVE  
DAYTONA BEACH, FL 32118

**New Principal Place of Business:**

**Current Mailing Address:**

2620 S. PENINSULA DRIVE  
DAYTONA BEACH, FL 32118

**New Mailing Address:**

**FEI Number:** 55-0866702

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIGHTFINE, MARY  
2620 S. PENINSULA DRIVE  
DAYTONA BEACH, FL 32118 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: LIGHTFINE, MARY  
Address: 2620 S. PENINSULA DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: D ( ) Delete  
Name: ROOY, PAUL  
Address: 435 S RIDGEWOOD AVE, SUITE 200  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: BELLUS, MIKE  
Address: 435 S RIDGEWOOD AVE, SUITE 201  
City-St-Zip: DAYTONA BEACH, FL 32114

**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:

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: MARY LIGHTFINE

PD

02/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date