2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2010
Secretary of State

DOCUMENT# N04000004957

Entity Name: IMMIGRANTS RIGHTS ADVOCACY CENTER, INC.

Current Principal Place of Business:

3333 RENAISSANCEBLVD.
209
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

400 CLEVELAND STREET
401
CLEARWATER, FL 33755 US

Current Mailing Address:

P.O. BOX 112097
NAPLES, FL 341080135 US

New Mailing Address:

FEI Number: 20-1155650 **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:

RODRIGUEZ, FRANK
3333 RENAISSANCE BLVD.
209
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

HEYMAN, ROBERT ATTY.
400 CLEVELAND STREET
401
CLEARWATER, FL 33755 US

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: ROBERT HEYMAN 05/03/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: NAGLE, LUZ E
Address: 400 CLEVELAND STREET STE. 401
City-St-Zip: CLEARWATER, FL 33755 US

Title: VPD
Name: MOSES, SARA
Address: 400 CLEVELAND STREET STE. 401
City-St-Zip: CLEARWATER, FL 33755 US

Title: TD
Name: LARES, TOMAS
Address: 400 CLEVELAND AVE STE 401
City-St-Zip: CLEARWATER, FL 33755 US

Title: SD
Name: DRAWKOSKY, LINDA
Address: 400 CLEVELAND STREET STE. 401
City-St-Zip: CLEARWATER, FL 33755 US

Title: D
Name: BONOAN, RAY FR
Address: 400 CLEVELAND STREET STE. 401
City-St-Zip: CLEARWATER, FL 33755

Title: D
Name: SKERRETT, RICARDO
Address: 400 CLEVELAND STREET STE. 401
City-St-Zip: CLEARWATER, FL 33755

I hereby 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 all other like empowered.

SIGNATURE: LINDA DRAWKOSKY SD 05/03/2010
Electronic Signature of Signing Officer or Director Date