2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006120

FILED May 04, 2009 Secretary of State

Entity Name: WORLD ORGANIZATION SOCIAL BETTERMENT, INC.

Current Principal Place of Business:		New Prine	New Principal Place of Business:	
	EDERE RD. LM BEACH, FL 33405			
Current M	lailing Address:	New Mail	ing Address:	
P.O. BOX LAKE PAR	530118 RK, FL 33403			
In accordan	ice with s. 607.193(2)(b), F.S., the corporation did not recei	•	ce.	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
817 BELVI	I, C. LUSTRA EDRE RD LM BEACH, FL 33405 US			
The above in the State	e named entity submits this statement for the purpos e of Florida.	se of changing	its registered office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICER	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete SUZE, LANDE 657 SW 9TH STREET BELLE GLADE, FL 33430	Title: Name: Address: City-St-Zip:	D (X) Change () Addition VALENTIN, LUSTRA 5812 STRAWBERRY LAKES CIR LAKE WORTH, FL 33463	
Title: Name: Address: City-St-Zip:	D () Delete JOSEPH, TOUSSAINT 817 BELVEDERE RD WEST PALM BEACH, FL 33405	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete AUGUSTE, ONIPE 817 BELVEDERE RD. WEST PALM BEACH, FL 33405	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete DUCASSE, SONY D 709 7TH LANE GREENACRES, FL 33463	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete CAZEAU, EDSON 1545 LAKE CRYSTAL DR APT A WEST PALM BEACH, FL 33411	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CAZEAU, EDSON 3780 N JOG RD WEST PALM BEACH, FL 33411	
Title: Name: Address:	D () Delete CARL, H RENE 818 BELVEDERE RD	Title: Name: Address:	D (X) Change () Addition LOUIS, JEAN LOUIS 3780 N JOG RD	

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: VALENTIN C LUSTRA D 05/04/2009