

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007905

FILED
Jan 20, 2009
Secretary of State

Entity Name: CHANGE A NATION, INC.

Current Principal Place of Business:

10620 HUTCHISON BLVD.
PANAMA CITY, FL 32407

New Principal Place of Business:

Current Mailing Address:

10620 HUTCHISON BLVD.
PANAMA CITY, FL 32407

New Mailing Address:

FEI Number: 20-1157093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTA, RUDIE
10620 HUTCHISON BLVD.
PANAMA CITY, FL 32407 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: POLLACK, ALEX J
Address: 3942 TRANSMITTER RD.
City-St-Zip: PANAMA CITY, FL 32404

Title: VD () Delete
Name: WOOD, FRANK
Address: 1815 TURNER WOOD LANE
City-St-Zip: PANAMA CITY, FL 32407

Title: TD () Delete
Name: STRICKLAND, DAN J
Address: P.O. BOX 7852
City-St-Zip: PANAMA CITY, FL 32411

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: RUDIE GUTA

RA

01/20/2009

Electronic Signature of Signing Officer or Director

Date