

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2009
Secretary of State**

DOCUMENT# N04000011111

Entity Name: PATRICIA'S AFTERCARE & SUMMER RETREAT INCORPORATED

Current Principal Place of Business:

1211 SESAME STREET
OPA-LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

1211 SESAME STREET
OPA-LOCKA, FL 33054

New Mailing Address:

FEI Number: 83-0413797 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LINER, PATRICIA
1211 SESAME STREET
OPA-LOCKA, FL 33054 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: M () Delete
Name: LINER, SAMUEL
Address: 1211 SESAME ST
City-St-Zip: OPA LOCKA, FL 33054

Title: M () Delete
Name: LINER, TERRANCE
Address: 1211 SESAME ST
City-St-Zip: OPA LOCKA, FL 33054

Title: P () Delete
Name: LINER, PATRICIA
Address: 1211 SESAME ST
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LINER, SAMUEL
Address: 1211 SESAME ST
City-St-Zip: OPA LOCKA, FL 33054

Title: D (X) Change () Addition
Name: LINER, TERRANCE
Address: 1211 SESAME ST
City-St-Zip: OPA LOCKA, FL 33054

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: PATRICIA LINER

Electronic Signature of Signing Officer or Director

P

04/30/2009

Date