## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000011555

FILED Aug 27, 2009 Secretary of State

Entity Name: TRUTH FOR THE FINAL GENERATION, INC.

urrent F	Principal Place of Business:	New Principal Place of Business:	
	STANG TRAIL ERDALE, FL 33330		
urrent N	lailing Address:	New Mailing Address:	
	STANG TRAIL ERDALE, FL 33330		
	r: 14-1919180 FEI Number Applied For ( )		)
ame and	d Address of Current Registered Agen	: Name and Address of New Registered Agent:	
4160 ML	IS, KENRICK ISTANG TRAIL JDERDALE, FL 33330 US		
	e named entity submits this statement for e of Florida.	he purpose of changing its registered office or registered agent, or	both
the Stat	e of Florida. <sup>*</sup> RE:		both
the Stat	e of Florida. Î		both
the Stat	e of Florida. <sup>*</sup> RE:		
the State GNATU  FFICER  cle: ame: ldress:	e of Florida. ** RE:Electronic Signature of Registered	Agent Date	
the Stat  GNATU  FFICER  tle: ame: ddress: ty-St-Zip: tle: ame: ddress:	e of Florida.  RE:  Electronic Signature of Registered  S AND DIRECTORS:  D () Delete RICHARDS, KENRICK 14160 MUSTANG TRAIL	Agent Date  ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS  Title: ( ) Change ( ) Addition Name: Name: Address:	
the Stat	e of Florida.  RE:  Electronic Signature of Registered  S AND DIRECTORS:  D () Delete RICHARDS, KENRICK 14160 MUSTANG TRAIL FORT LAUDERDALE, FL 33330  D () Delete MCCORMACK, SHARON 14045 N MIAMI AVENUE	Agent  ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:	

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: KENRICK RICHARDS D 08/27/2009