2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N05000000106

Entity Name: NATIONAL ORGANIZATION FOR BUILDING LEADERS TO BE EXCELLENT, INC.

Current Principal Place of Business:

16240 NW 17 PLACE
MIAMI, FL 33054

New Principal Place of Business:

Current Mailing Address:

16240 NW 17 PLACE
MIAMI, FL 33054

New Mailing Address:

FEI Number: 20-4319508 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BROWN, VALARIE
16240 NW 17 PLACE
MIAMI, 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:	PCEO	( ) Delete
Name:	BROWN, VALARIE L	
Address:	16240 NW 17 PLACE	
City-St-Zip:	MIAMI, FL 33054	
Title:	S	( ) Delete
Name:	BROWN, SHERYL	
Address:	16240 NW 17 PLACE	
City-St-Zip:	MIAMI, FL 33054	
Title:	D	( ) Delete
Name:	WILLIAMS, CELINDA	
Address:	2513 E WILSHIRE DR	
City-St-Zip:	MIRAMAR, FL 33025	
Title:	D	( ) Delete
Name:	JACKSON, PHILLIP	
Address:	1000 CORPORATE DRIVE STE 700	
City-St-Zip:	FORT LAUDERDALE, FL 33334	
Title:	D	( ) Delete
Name:	SALAHUD-DIN, AUTLEY	
Address:	17410 NW 48TH AVE	
City-St-Zip:	MIAMI GARDENS, FL 33055	
Title:	D	( ) Delete
Name:	LYNCH, RUTH	
Address:	2060 NW 48TH TERRACE	
City-St-Zip:	LAUDERDALE HILL, FL 33312	

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:	
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: VALARIE BROWN PCEO 04/28/2009

Electronic Signature of Signing Officer or Director — Date