2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2008
Secretary of State

DOCUMENT# N05000000289

Entity Name: IF MY PEOPLE, INC.

Current Principal Place of Business:

C/O SHARON STITELY
2799 N. 40TH AVE.
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

C/O CATHERINE DARVILLE
2226 GREENE STREET
HOLLYWOOD, FL

New Mailing Address:

FEI Number: 77-0650364 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STITELY, SHARON
2799 N 40TH AVENUE
HOLLYWOOD, FL 33021 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: STD ( ) Delete
Name: DARVILLE, CATHERINE
Address: 2226 GREENE STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: D (X) Delete
Name: PARRISH, MELVA
Address: 9471 EVERGREEN PLACE #107
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: PD ( ) Delete
Name: STITELY, SHARON
Address: 2799 N 40 AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD ( ) Delete
Name: WOODIN, JOHN
Address: 7517 GARFIELD STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: D ( ) Delete
Name: KOSAK, GARY
Address: 2095 166TH AVE.
City-St-Zip: MIRMAR, FL 33027

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D ( ) Change (X) Addition
Name: JACKSON, AVA
Address: 15959 SW 54TH COURT
City-St-Zip: MIRAMAR, FL 33027

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: CATHERINE DARVILLE STD 05/06/2008

Electronic Signature of Signing Officer or Director — Date