2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2009
Secretary of State

DOCUMENT# N05000002529

Entity Name: COMMUNITY ACTION NETWORK, INC.

Current Principal Place of Business:

1908 LAKE ATRIUM CIRCLE
UNIT 14
ORLANDO, FL 32839 US

New Principal Place of Business:

Current Mailing Address:

1908 LAKE ATRIUM CIRCLE
UNIT 14
ORLANDO, FL 32839 US

New Mailing Address:

FEI Number: 20-2262907 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, SADAT
151 EAST WASHINGTON STREET
UNIT 216
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

SMITH, SADAT
3217 FAWNWOOD DRIVE
OCOEE, FL 34761 US

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: _____ 01/25/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: LOWERY, MONIQUE A
Address: 1908 LAKE ATRIUM CIRCLE
City-St-Zip: ORLANDO, FL 32839

Title: DR ( ) Delete
Name: SMITH, SADAT M
Address: 151 EAST WASHINGTON STREET , UNIT 216
City-St-Zip: ORLANDO, FL 32801

Title: MR ( ) Delete
Name: COWAN, RONALD
Address: 2694 LAKE JACKSON CIRCLE
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VICE (X) Change ( ) Addition
Name: LOWERY, MONIQUE A
Address: 1908 LAKE ATRIUM CIRCLE
City-St-Zip: ORLANDO, FL 32839

Title: VICE (X) Change ( ) Addition
Name: SMITH, SADAT M
Address: 3217 FAWNWOOD DRIVE
City-St-Zip: OCOEE, FL 34761

Title: PRES (X) Change ( ) Addition
Name: COWAN, RONALD
Address: 2694 LAKE JACKSON CIRCLE
City-St-Zip: APOPKA, FL 32703

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: MONIQUE LOWERY VISE 01/25/2009
Electronic Signature of Signing Officer or Director — Date