

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004295

FILED
Apr 27, 2009
Secretary of State

Entity Name: THE GRENADIAN-AMERICAN EDUCATIONAL & CULTURAL ORGANIZATION, INC.

Current Principal Place of Business:

4549 SETTLEMENT CIRCLE
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 683245
ORLANDO, FL 328683245

New Mailing Address:

FEI Number: 59-3808453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMISSIONG, GEORGE
4549 SETTLEMENT CIRCLE
ORLANDO, FL 32818 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: P/D () Delete
Name: COMMISSIONG, GEORGE
Address: 4549 SETTLEMENT CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: S/D () Delete
Name: BRIDGEMAN, STEVE
Address: P.O. BOX 683245
City-St-Zip: ORLANDO, FL 32868

Title: T/D () Delete
Name: CHARLES, BERNADETTE
Address: P.O. BOX 683245
City-St-Zip: ORLANDO, FL 32868

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: VP/D () Change (X) Addition
Name: DUNCAN, VALDA
Address: P.O. BOX 683245
City-St-Zip: ORLANDO, FL 32868

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: GEORGE COMMISSIONG

P/D

04/27/2009

Electronic Signature of Signing Officer or Director

Date