

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005154

FILED  
May 03, 2009  
Secretary of State

Entity Name: FLORIDA FAMILY RESOURCE CENTER, INC.

**Current Principal Place of Business:**

224 N. ROCKINGHAM AVENUE  
TAVARES, FL 32778

**New Principal Place of Business:**

1665 E. ALFRED STREET  
SUITE 11  
TAVARES, FL 32778

**Current Mailing Address:**

PO BOX 1016  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 20-2927044      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:**

CARTELLI, LAWRENCE  
224 N. ROCKINGHAM AVENUE  
TAVARES, FL 32778      US

**Name and Address of New Registered Agent:**

CARTELLI, LAWRENCE  
1665 E. ALFRED STREET  
SUITE 11  
TAVARES, FL 32778      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: LAWRENCE CARTELLI

05/03/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title:            D            ( ) Delete  
Name:            CARTELLI, LAWRENCE  
Address:        224 N. ROCKINGHAM AVENUE  
City-St-Zip:    TAVARES, FL 32778

Title:            D            ( ) Delete  
Name:            CARTELLI, JANE  
Address:        224 N. ROCKINGHAM AVENUE  
City-St-Zip:    TAVARES, FL 32778

Title:            D            ( ) Delete  
Name:            NUHFER, ROBERTA  
Address:        8662 TANSY DRIVE  
City-St-Zip:    ORLANDO, FL 32819

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            D            (X) Change ( ) Addition  
Name:            CARTELLI, LAWRENCE  
Address:        1665 E. ALFRED STREET  
City-St-Zip:    TAVARES, FL 32778

Title:            D            (X) Change ( ) Addition  
Name:            CARTELLI, JANE  
Address:        1665 E. ALFRED STREET  
City-St-Zip:    TAVARES, FL 32778

Title:                            ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:            D            ( ) Change (X) Addition  
Name:            LAUREN, CARTELLI  
Address:        1665 E. ALFRED STREET  
City-St-Zip:    TAVARES, FL 32778

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: LAWRENCE CARTELLI

D

05/03/2009

Electronic Signature of Signing Officer or Director

Date