## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000007735

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
136 NE 1 CALA, F				
Current Mailing Address:		New Mailing Address:		
136 NE 1 CALA, F				
El Number	: 20-4513296	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
SORDON	YVONNE			
136 NE 1 DCALA, F	4TH ST	S		
CALA, F The above on the State	4TH ST L 34470 U named entity e of Florida.		ourpose of changing its registere	d office or registered agent, or botl
CALA, F he above	4TH ST L 34470 U named entity e of Florida. RE:	submits this statement for the p		d office or registered agent, or botl
OCALA, F The above on the State	4TH ST L 34470 U named entity e of Florida. RE:	submits this statement for the particles of Registered Agreement for Registered Agreement f	ent	
OCALA, F The above on the State	ATH ST L 34470 U named entity of Florida. RE: Electro S AND DIRECT	submits this statement for the prince Signature of Registered Agentors:  ) Delete ONNE	ent	Date
DCALA, F The above In the State SIGNATUE  DFFICER: ittle: lame: ddress:	ATH ST L 34470 U named entity of Florida.  RE: Electro S AND DIRECTOR GORDON, YV 1136 NE 14TH OCALA, FL 36	submits this statement for the price Signature of Registered Agental CTORS:  ) Delete ONNE I ST 4470  ) Delete DBERT I ST	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: YVONNE GORDON PD 04/30/2009