

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008660

FILED
Feb 10, 2009
Secretary of State

Entity Name: INTERNATIONAL MASTERMIND ASSOCIATION, INC.

Current Principal Place of Business:

6600 NW 27TH AVE
208
MIAMI, FL 33147 US

New Principal Place of Business:

Current Mailing Address:

6600 NW 27TH AVE
208
MIAMI, FL 33147 US

New Mailing Address:

FEI Number: 20-8336706 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCNEILL, ANN
6600 NW 27TH AVE
208
MIAMI, FL 33147 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: PD () Delete
Name: MCNEILL, ANN
Address: 19201 E OAKMONT DR
City-St-Zip: MIAMI LAKES, FL 33015 US

Title: VPD () Delete
Name: THOMAS, NIFRETTA
Address: 1499 NW 74TH ST
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: MITCHELL-DAWSEY, JUANITA
Address: 8021 NE 7TH AVE
City-St-Zip: MIAMI, FL 33138

Title: TD () Delete
Name: ENGLISH, YOLANDA
Address: 3921 SW 186TH AVE
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCNEILL, ANN
Address: 19201 E OAKMONT DR
City-St-Zip: HIALEAH, FL 33015 US

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

Title: SD (X) Change () Addition
Name: ROKER, ROSALIND
Address: 10666 NE 203RD STREET
City-St-Zip: MIAMI, FL 33169

Title: TD (X) Change () Addition
Name: FOSTER, ADRIAN
Address: 1240 NW 203RD STREET
City-St-Zip: MIAMI, FL 33169

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: ANN MCNEILL

PD

02/10/2009

Electronic Signature of Signing Officer or Director

Date