2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008844

FILED Apr 15, 2009 Secretary of State

Entity Name: LATIN AMERICAN FOUNDATION FOR EDUCATION AND HEALTH, INC.

Current Principal Place of Business: New Principal Place of Business:

391 DOVER PL 3750 WEYMOUTH CIRCLE 203

NAPLES, FL 34112 NAPLES, FL 34104

New Mailing Address: Current Mailing Address:

391 DOVER PL 3750 WEYMOUTH CIRCLE NAPLES, FL 34112

NAPLES, FL 34104

FEI Number: 11-3789312 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:

QUINTERO, ANTHONY J QUINTERO, ANTHONY J 391 DOVER PL 3750 WEYMOUTH CIRCLE

203 NAPLES, FL 34112 NAPLES, FL 34104 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: ANTHONY J QUINTERO 04/15/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

SANDERLIN, JERRY

391 DOVER PL 203

NAPLES,, FL 34104

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition QUINTERO, ANTHONY J QUINTERO, ANTHONY J Name: Name:

391 DOVER PL 203 Address: 3750 WEYMOUTH CIRCLE Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34112

Title: Title: (X) Change () Addition () Delete CABTERA, FRANCISCO E Name: CABTERA, FRANCISCO E Name:

Address: 391 DOVER PL 203 Address: 3750 WEYMOUTH CIRCLE City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34112

Title: () Delete Title: (X) Change () Addition

QUINTERO, JAIME QUINTERO, JAIME Name: Name: 3750 WEYMOUTH CIRCLE Address: 391 DOVER PL 203 Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34112

() Delete Title: Title: (X) Change () Addition

HERNANDEZ, ROSARIO HERNANDEZ, ROSARIO Name: Name: 391 DOVER PL 203 3750 WEYMOUTH CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34112

Title: () Delete Title: (X) Change () Addition

TUKES, ARTHUR SANDERLIN, JERRY Name: Name: 391 DOVER PL 203 3750 WEYMOUTH CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES,, FL 34112

Title: (X) Delete Title: () Change () Addition

Name: Address: City-St-Zip:

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: ANTHONY J QUINTERO D 04/15/2009

Electronic Signature of Signing Officer or Director

Date