

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010338

FILED  
Apr 19, 2009  
Secretary of State

Entity Name: EXPOSING THE TRUTH, INC.

## Current Principal Place of Business:

3791 NW 27TH COURT  
LAUDERDALE LAKES, FL 33311

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1759  
FT. LAUDERDALE, FL 33311

## New Mailing Address:

FEI Number: 68-0625068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, VERNELL  
3791 NW 27TH COURT  
LAUDERDALE LAKES, FL 33311 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: D ( ) Delete  
Name: ROBINSON, VERNELL  
Address: P.O. BOX 1759  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: V/P ( ) Delete  
Name: ROBINSON, PERRY  
Address: 3791 NW 27TH COURT  
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: O ( ) Delete  
Name: MITCHELL, LESLIE  
Address: 7360 NW 36TH STREET  
City-St-Zip: LAUDERHILL, FL 33319

Title: O ( ) Delete  
Name: DAVIS, NATARSHA  
Address: 14031 OAKRIDGE DR.  
City-St-Zip: DAVIE, FL 33325

Title: O ( ) Delete  
Name: GREEN, NOVEL  
Address: 8150 W. MCNAB RD APT #121  
City-St-Zip: TAMARAC, FL 33321

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

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

Title: O ( ) Change (X) Addition  
Name: MOORE, LATASHER  
Address: P.O. BOX 1759  
City-St-Zip: FT. LAUDERDALE, FL 33311

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: VERNELL ROBINSON

D

04/19/2009

Electronic Signature of Signing Officer or Director

Date