## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000011636

844 PINEMEADOW COVE

JACKSONVILLE, FL 322062139

Address:

City-St-Zip:

FILED Feb 25, 2009 Secretary of State

Entity Na	me: 8 ET 40	DUVAL SALON 892, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1127 ATLANTIC BLVD ATLANTIC BEACH, FL 32233			1127 ATLANTIC BLVD ATLANTIC BEACH, FL	32233-466 US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	ANTIC BLVD BEACH, FL	32233	1127 ATLANTIC BLVD ATLANTIC BEACH, FL	32233 US	
FEI Number:	: 13-4310046	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
504 COUR	VIRGINIA H RAGEOUS CO BEACH, FL	OURT SOUTH 32233 US			
	named entity e of Florida.	/ submits this statement for the ρ	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	onic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SWORD, VIR 504 COURAG	) Delete GINIA H EOUS COURT SOUTH EACH, FL 32233	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	ADAMS, MAR 235 RAVINE		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	D ( STEVENS, VE	) Delete ERA A	Title: ( Name:	) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: VIRGINIA H. SWORD 02/25/2009 D