2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000269

FILED Feb 17, 2009 Secretary of State

Entity Name: MEC RESOURCE CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 115 NE 3RD ST POMPANO BEACH, FL 33060 **Current Mailing Address: New Mailing Address:** 115 NE 3RD ST POMPANO BEACH, FL 33060 FEI Number: 26-0133208 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: NELSON, EULA DARBY, BARBARA 4699 NORTH SR 7 STE Z 115 NE 3RD ST POMPANO BEACH, FL 33060 US TAMARAC, FL 33319 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: BARBARA DARBY 02/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition DARBY, BARBARA Name: Name: 429 NW 9TH AVE Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33311 City-St-Zip: Title: DV Title: () Delete (X) Change () Addition Name: NELSON, EULA Name: NELSON, EULA Address: 3961 NW 34TH AVE Address: 3961 NW 34TH AVE City-St-Zip: LAUDERDALE LKS, FL 33309 City-St-Zip: LAUDERDALE LKS, FL 33309 Title: () Delete Title: () Change () Addition JAMES, JUDITH Name: Name: Address: 115 NE 3RD ST Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: DT Title: () Change () Addition () Delete Name: COLLINS, LOIS Name: Address: 2800 NW 44TH ST #311 Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: Title: (X) Delete Title: () Change () Addition KEMP, OTIS Name: Name: 115 NE 3RD ST Address: Address: POMPANO BCH, FL 33060 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition KEMP, VIVIAN E Name: Name: Address: 115 NE 3RD ST Address: POMPANO BCH, FL 33060 City-St-Zip: 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: BARBARA DARBY P 02/17/2009