2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N06000000771

Entity Name: FAITH LITERACY COMMUNITY RESOURCE CENTER, INC.

Current Principal Place of Business:

2424 PRAIRIE VIEW DRIVE
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

PO BOX 618354
ORLANDO, FL 32861

New Mailing Address:

FEI Number: 20-4150290 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAWSON, TAMMY L
2424 PRAIRIE VIEW DRIVE
WINTER GARDEN, FL 34787 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:	P	( ) Delete
Name:	DAWSON, JOHNNY D	
Address:	P O BOX 618354	
City-St-Zip:	ORLANDO, FL 32861	
Title:	VP	( ) Delete
Name:	DAWSON, TAMMY L	
Address:	PO BOX 618354	
City-St-Zip:	ORLANDO, FL 32861	
Title:	SECR	( ) Delete
Name:	CONEY, SHERYL L	
Address:	7317 HIGH LAKE DR.	
City-St-Zip:	ORLANDO, FL 32818	
Title:	A TR	( ) Delete
Name:	CONEY, LARRY	
Address:	7317 HIGH LAKE DR	
City-St-Zip:	ORLANDO, FL 32818	
Title:	TREA	( ) Delete
Name:	DEERING, ELAINE	
Address:	991 SHETLAND AVE	
City-St-Zip:	WINTER SPRINGS, FL 32708	

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:	

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: JOHNNY D. DAWSON PRES 04/27/2009
Electronic Signature of Signing Officer or Director — Date