

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001375

FILED
Apr 22, 2009
Secretary of State

Entity Name: POWELL-CACUA FOUNDATION, INC.

Current Principal Place of Business:

7218 SEAMAN'S BLUFF
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

7218 SEAMAN'S BLUFF
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 65-1267703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CACUA, BENEDICTO
7218 SEAMAN'S BLUFF
ORLANDO, FL 32835 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: JOHNSON, RICK
Address: 2863 CARDASSI DR
City-St-Zip: OCOEE, FL 34761

Title: VD () Delete
Name: POWELL, BETTY CAROL
Address: 4006 CONWAY PLACE CIR
City-St-Zip: ORLANDO, FL 32812

Title: CD () Delete
Name: CACUA, BENEDICTO
Address: 7218 SEAMAN'S BLUFF
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: BALTODANO, LUIS E
Address: 7969 HORSE FERRY ROAD
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: SAAVEDRA, CARLOS
Address: 9124 N KENWOOD TERRACE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: STD () Delete
Name: CACUA, LINDA
Address: 7218 SEAMAN'S BLUFF
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: JARVIS, RICHARD D
Address: 2053 WOODY DRIVE
City-St-Zip: WINDERMERE, FL 34786

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: STD (X) Change () Addition
Name: CACUA, LINDA D
Address: 7218 SEAMAN'S BLUFF
City-St-Zip: ORLANDO, FL 32835

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: BENEDICTO CACUA

C/D

04/22/2009

Electronic Signature of Signing Officer or Director

Date