2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002565

Entity Name: CONGRESS OF LEADERS OF FLORIDA, INC.

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

17905 CACHET ISLE TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

17905 CACHET ISLE PO BOX 12383 TAMPA, FL 33647 SAN JUAN, PR 00914

FEI Number: 20-4561805 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:

RAMOS, JOSES 17905 CACHET ISLE TAMPA, FL 33647 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BRIZZIE, HILDA
 Name:
 BRIZZIE, HILDA

 Address:
 306 E. BULLARK PARKWAY
 Address:
 PO BOX 12383

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 SAN JUAN, PR 00914

Title: V () Delete Title: V (X) Change () Addition Name: FERRER, MARIA E Name: FERRER, MARIA E

 Name:
 FERRER, MARIA E
 Name:
 FERRER, MARIA E

 Address:
 306 E. BULLARK PARKWAY
 Address:
 PO BOX 12383

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 SAN JUAN, PR 00914

Title: V () Delete Title: V (X) Change () Addition Name: BIGAS, EDGARDO Name: BIGAS, EDGARDO

 Address:
 306 E. BULLARK PARKWAY
 Address:
 PO BOX 12383

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 SAN JUAN, PR 00914

Title: V () Delete Title: V (X) Change () Addition Name: RIVERA, JOSE J DR. Name: RIVERA, JOSE J DR.

 Name:
 RIVERA, JOSE J DR.
 Name:
 RIVERA, JOSE J DR.

 Address:
 306 E. BULLARK PARKWAY
 Address:
 PO BOX 12383

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 SAN JUAN, PR 00914

 $\label{eq:title:V} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

 Name:
 DIAGO, CARLO
 Name:
 DIAGO, CARLO

 Address:
 306 E. BULLARK PARKWAY
 Address:
 PO BOX 12383

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 SAN JUAN, PR 00914

Title: S () Delete Title: S (X) Change () Addition

 Name:
 REYES, ANGEL DR.
 Name:
 REYES, ANGEL DR.

 Address:
 306 E. BULLARK PARKWAY
 Address:
 PO BOX 12383

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 SAN JUAN, PR 00914

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: HILDA BRIZZIE P 02/24/2009