

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003989

FILED
Mar 27, 2009
Secretary of State

Entity Name: ALL SOULS, INCORPORATED

Current Principal Place of Business:

429 KIRBY STREET
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 283
EAST PALATKA, FL 32131

New Mailing Address:

FEI Number: 14-1960681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPERSON, GAYE ANASTASIA
114 RIVERVIEW DR
EAST PALATKA, FL 32131 US

Name and Address of New Registered Agent:

SVETLIK, ANNIE
511 NORTH 3RD STREET
PALATKA, FL 32177 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: ANNIE SVETLIK

03/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ESPERSON, GAYE ANASTASIA
Address: 114 RIVERVIEW DR
City-St-Zip: EAST PALATKA, FL 32131

Title: S () Delete
Name: PETTIT, JANET
Address: 418 EMMITT STREET
City-St-Zip: PALATKA, FL 32177

Title: T () Delete
Name: SVETLIK, ANNIE
Address: 511 N THIRD STREET
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: ZEIGLER, GAIL
Address: 133 FEDERAL POINT ROAD
City-St-Zip: EAST PALATKA, FL 32131

Title: S (X) Change () Addition
Name: SHARBAUGH, KEVIN
Address: 114 RIVERVIEW DRIVE
City-St-Zip: EAST PALATKA, FL 32131

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: ANNIE SVETLIK

T

03/27/2009

Electronic Signature of Signing Officer or Director

Date