

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004085

FILED
Jul 09, 2007
Secretary of State

Entity Name: KEEPER OF THE FLAME P.O.A., INC.

Current Principal Place of Business:

4731 NW 32ND PL
GAINESVILLE, FL 32606

New Principal Place of Business:

22231 NW 222 STREET
HIGHSPRINGS, FL 32643

Current Mailing Address:

4731 NW 32ND PL
GAINESVILLE, FL 32606

New Mailing Address:

PO BOX 357217
GAINESVILLE, FL 32635-721

FEI Number: 56-2304716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOBLEY, RAYMOND
4731 NW 32ND PL
GAINESVILLE, FL 32606 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: PD () Delete
Name: MOBLEY, RAYMOND III
Address: 4731 NW 32ND PL
City-St-Zip: GAINESVILLE, FL 32606

Title: V () Delete
Name: MOBLEY, APRIL R
Address: 4731 NW 32ND PL
City-St-Zip: GAINESVILLE, FL 32606

Title: T () Delete
Name: BISHOP, SARITHA
Address: 22231 NW RAIL ROAD AVE
City-St-Zip: HIGHSPRINGS, FL 32653

Title: S () Delete
Name: JOHNSON, JOYCE
Address: 530 SE ADAMS AVE
City-St-Zip: HIGHSPRINGS, FL 32643

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: THOMAS, MARTHA
Address: 9921 NW COUNTY ROAD 235
City-St-Zip: ALACHUA, FL 32615

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: APRIL R. MOBLEY

VP

07/09/2007

Electronic Signature of Signing Officer or Director

Date