2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004085

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

FILED Jun 10, 2008 Secretary of State

Current Principal Place of Business:		New Princip	New Principal Place of Business:	
22231 NW 222 STREET HIGHSPRINGS, FL 32643			22231 NW 222 STREET/ RAIL-ROAD AVE. HIGHSPRINGS, FL 32643 US	
Current Mailing Address:		New Mailing	New Mailing Address:	
PO BOX 357217 GAINESVILLE, FL 32635			PO BOX 357217 GAINESVILLE, FL 32635 US	
In accordan	: 56-2304716 FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the corporation did not I Address of Current Registered Agent:	•	able () Certificate of Status Desired ()	
	-	Nume und A	duress of New Registered Agent.	
4731 NW 3	RAYMOND 32ND PL ILLE, FL 32606 US			
	e named entity submits this statement for the pu e of Florida.	urpose of changing its	registered office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Age	nt	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS	CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete MOBLEY, RAYMOND III 4731 NW 32ND PL GAINESVILLE, FL 32606	Name: 1 Address: 4	PD (X) Change () Addition MOBLEY, RAYMOND III 4731 NW 32ND PL GAINESVILLE, FL 32606 US	
Title: Name: Address: City-St-Zip:	V () Delete MOBLEY, APRIL R 4731 NW 32ND PL GAINESVILLE, FL 32606	Name: 1 Address: 4	V/S (X) Change () Addition MOBLEY, APRIL R 4731 NW 32ND PL GAINESVILLE, FL 32606 US	
Title: Name: Address: City-St-Zip:	T () Delete THOMAS, MARTHA 9921 NW COUNTY ROAD 235 ALACHUA, FL 32615	Name: I Address: 4	T/ C (X) Change () Addition LAMAR, DENISE C 4756 MIRANDA CIRCLE DRLANDO, FL 32818 US	
Title: Name: Address: City-St-Zip:	S () Delete JOHNSON, JOYCE 530 SE ADAMS AVE HIGHSPRINGS, FL 32643	Name: I Address: 7	S (X) Change () Addition ENGLISH, WARREN Q 720 NW 23 AVE GAINESVILLE, FL 32609 US	
Title: Name: Address: City-St-Zip:	()Delete	Name: I Address: 3	S () Change (X) Addition DEBOSE, TAMESHA N 3737 NW 20TH PLACE GAINESVILLE, FL 32606 US	
Title: Name: Address: City-St-Zip:	() Delete	Name: H Address: \$	CP () Change (X) Addition HOWARD, MARY J 574 EAST MAIN STREET BRONSON, FL 32621 US	

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 MOBLEY VP/S 06/10/2008