## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000005625

Entity Name: MANNA ON WHEELS, INC.

FILED May 15, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2217 BOGAERT RD **DOVER, FL 33527 Current Mailing Address: New Mailing Address:** 2217 BOGAERT RD **DOVER, FL 33527** FEI Number: 20-5029873 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: Name and Address of New Registered Agent: KOSAN, RICHARD R ESQ. 112 W WINDHORST RD BRANDON, FL 33510 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: () Change () Addition () Delete BASS, JAMES D Name: Name: Address: 2217 BOGAERT RD Address: City-St-Zip: **DOVER, FL 33527** City-St-Zip: Title: () Delete Title: () Change () Addition Name: CHERRY, JAMES W Name: Address: 4305 SWIFT CR Address: City-St-Zip: VALRICO, FL 33594 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, MIKEL E Name: Name: Address: 3411 PALM BCH DR Address: City-St-Zip: VALRICO, FL 33594 City-St-Zip: Title: ( ) Delete Title: () Change () Addition PARKER, ANTHONY D Name: Name: 818 OLD WELCOME RD Address: Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: Title: Title: ( ) Delete () Change () Addition PENDERGRASS, HURT A Name: Name: 903 BALMORAL PL Address: Address: City-St-Zip: VALRICO, FL 33594 City-St-Zip: Title: () Delete Title: () Change () Addition WHITTEN, DAVID A Name: Name: Address: 10403 FROG POND DR Address: RIVERVIEW, FL 33569 City-St-Zip: 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: JAMES D BASS PRES 05/15/2009