2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005877

FILED Jan 15, 2008 Secretary of State

Entity Name: CONTACT NEXT OF KIN INC.

urrent P	Principal Place of Business:	New Principal Place of Business:
113 COC RLAND	COS DR D, FL 32807	
urrent N	Mailing Address:	New Mailing Address:
113 COC RLAND	COS DR D, FL 32807	
El Number	: FEI Number Applied For	() FEI Number Not Applicable (X) Certificate of Status Desired ()
lame and	d Address of Current Registered Age	ent: Name and Address of New Registered Agent:
250 PER	N, DEBRA SHING AVE	
	D, FL 32822 US	
he above		or the purpose of changing its registered office or registered agent, or bot
he above	e named entity submits this statement fo e of Florida.	or the purpose of changing its registered office or registered agent, or bot
he above the Stat	e named entity submits this statement fo e of Florida.	
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he above the Stat IGNATU	e named entity submits this statement for e of Florida. RE: Electronic Signature of Register	ed Agent Date
he above the Stat IGNATU FFICER tte: ame: ddress:	e named entity submits this statement for e of Florida. RE: Electronic Signature of Register S AND DIRECTORS: D () Delete FOUNTAIN, DEBRA 6250 PERSHING AVE	ed Agent ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address:
he above the Stat IGNATU FFICER tle: ame: Idress: ty-St-Zip: tle: ame: Idress:	e named entity submits this statement for e of Florida. RE: Electronic Signature of Register S AND DIRECTORS: D () Delete FOUNTAIN, DEBRA 6250 PERSHING AVE ORLANDO, FL 32822 D () Delete PARDO, JUDY 7113 COCOS DR	ed Agent ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: DEBRA FOUNTAIN D 01/15/2008