

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008043

FILED
Apr 01, 2009
Secretary of State

Entity Name: BILINGUAL ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

13131 SW 54TH STREET
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

13131 SW 54TH STREET
MIAMI, FL 33175

New Mailing Address:

FEI Number: 65-0078619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, LILIA
13131 SW 54TH STREET
MIAMI, FL 33175 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: P () Delete
Name: PANEQUE, ONEYDA
Address: 250 SW 129TH AVENUE
City-St-Zip: MIAMI, FL 33184

Title: V () Delete
Name: CASTILLO, MELINA
Address: 8411 NW 8TH STREET, #403
City-St-Zip: MIAMI, FL 33126

Title: S () Delete
Name: GUTIERREZ, SANDRA G
Address: 23756 SW 111 CT
City-St-Zip: HOMESTEAD, FL 33032

Title: T () Delete
Name: FERNANDEZ, LILIA
Address: 13131 SW 54TH STREET
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LILIA FERNANDEZ

MS.

04/01/2009

Electronic Signature of Signing Officer or Director

Date