

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011289

FILED
Mar 27, 2008
Secretary of State

Entity Name: COALITION FOR HEALTH AND LITERACY INTERNATIONAL, INC.

Current Principal Place of Business:

3214 SUNNYBROOK AVE SOUTH
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

3214 SUNNYBROOK AVE SOUTH
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: 45-0548635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, NICOLE
3214 SUNNYBROOK AVE SOUTH
JACKSONVILLE, FL 32254 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: JACKSON, NICOLE
Address: 3214 SUNNYBROOK AVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32254

Title: TD () Delete
Name: JACKSON, DAMIAN
Address: 3214 SUNNYBROOK AVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32254

Title: S () Delete
Name: COLLINS, DONTE
Address: 3214 SUNNYBROOK AVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32254

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: COLLINS, DONTE D
Address: 3214 SUNNYBROOK AVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32254

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: NICOLE JACKSON

P

03/27/2008

Electronic Signature of Signing Officer or Director

Date