

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001322

FILED
May 12, 2009
Secretary of State

Entity Name: ASOCIACION MEXICANA DEL NORESTE DE FLORIDA, INC.

Current Principal Place of Business:

1275 TALBOT AVENUE
JACKSONVILLE, FL 32205

New Principal Place of Business:

7705 MONETTA DRIVE
JACKSONVILLE, FL 32277

Current Mailing Address:

1275 TALBOT AVENUE
JACKSONVILLE, FL 32205

New Mailing Address:

7705 MONETTA DRIVE
JACKSONVILLE, FL 32277

FEI Number: 20-8405873 **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:

ROMERO, CLAUDIA
3502 EVE DRIVE EAST
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

ARELLANO, YOLANDA
7705 MONETTA DRIVE
JACKSONVILLE, FL 32277 US

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: YOLANDA ARELLANO

05/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARELLANO, YOLANDA
Address: 7705 MONETTA DR
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD () Delete
Name: ROMERO, CLAUDIA
Address: 3502 EVE DR EAST
City-St-Zip: JACKSONVILLE, FL 32246

Title: VTD (X) Delete
Name: MICHALOWSKI, ANAHI
Address: 1275 TALBOT AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARELLANO, YOLANDA
Address: 7705 MONETTA DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: VTD (X) Change () Addition
Name: MICHALOWSKI, ANAHI
Address: 1275 TALBOT AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

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: YOLANDA ARELLANO

PD

05/12/2009

Electronic Signature of Signing Officer or Director

Date