2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 07, 2009
Secretary of State

DOCUMENT# N07000001943

Entity Name: CARIBBEAN COALITION OF ASSOCIATIONS, INC.

Current Principal Place of Business:

1418 27TH AVE. S
ST PETERSBURG, FL 33705

New Principal Place of Business:

3799 WELLINGTON PKWY
PALM HARBOR, FL 34685

Current Mailing Address:

1418 27TH AVE. S
ST PETERSBURG, FL 33705

New Mailing Address:

3799 WELLINGTON PKWY
PALM HARBOR, FL 34685

FEI Number: 37-1544985 **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:

JACKSON, DONALD
1418 27TH AVE. S
ST PETERSBURG, FL 33705 US

Name and Address of New Registered Agent:

MARSHALL, GENE E MR.
3799 WELLINGTON PKWY
PALM HARBOR, FL 34685 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: GENE E. MARSHALL 09/07/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MARSHALL, GENE
Address: 3799 WELLINGTON PK WAY
City-St-Zip: PALM HARBOR, FL 34685

Title: D ( ) Delete
Name: LARMOND, ELEYES E
Address: 14613 PINE GLEN CIRCLE
City-St-Zip: LUTZ, FL 33559

Title: D (X) Delete
Name: JACKSON, DONALD
Address: P.O. BOX 14046
City-St-Zip: ST PETERSBURG, FL 33733

Title: D ( ) Delete
Name: DANIEL, GARY S
Address: 708 KINGSWOOD LP
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MARSHALL, GENE E MR.
Address: 3799 WELLINGTON PK WAY
City-St-Zip: PALM HARBOR, FL 34685

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: GENE E. MARSHALL D 09/07/2009
Electronic Signature of Signing Officer or Director Date