

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002698

FILED
Apr 30, 2009
Secretary of State

Entity Name: KEEP AMERICA BEAUTIFUL AFFILIATES OF FLORIDA, INC.

Current Principal Place of Business:

1620 ADAMSON ROAD
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

1620 ADAMSON ROAD
COCOA, FL 32926

New Mailing Address:

FEI Number: 20-8948700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBER, LARRY S
1620 ADAMSON ROAD
COCOA, FL 32926 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: WEBER, LARRY S
Address: 1620 ADAMSON ROAD
City-St-Zip: COCOA, FL 32926

Title: V () Delete
Name: DUNCAN, TODD
Address: POST OFFICE BOX 1434
City-St-Zip: YULEE, FL 32041

Title: S () Delete
Name: WASHINGTON, SANDRA
Address: 2817 CATTLEMEN ROAD
City-St-Zip: SARASOTA, FL 43232

Title: D () Delete
Name: SANDERS, BILL
Address: 4707 140TH AVENUE N #214
City-St-Zip: CLEARWATER, FL 33762

Title: D () Delete
Name: JOLLEY, TANIA
Address: 3545 ROSEMARY HILL ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: TONKIN, JOHN
Address: 6758 PARK AVENUE
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WEBER, LARRY S
Address: 1620 ADAMSON ROAD
City-St-Zip: COCOA, FL 32926

Title: P (X) Change () Addition
Name: DUNCAN, TODD
Address: POST OFFICE BOX 1434
City-St-Zip: YULEE, FL 32041

Title: T (X) Change () Addition
Name: ANDERSON, GLENDA
Address: 25550 HARBOR VIEW ROAD, SUITE 2
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VPT (X) Change () Addition
Name: SANDERS, BILL
Address: 4707 140TH AVENUE N #214
City-St-Zip: CLEARWATER, FL 33762

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: GLENDA ANDERSON

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date