

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004451

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: MANOS GENEROSAS FOUNDATION, NON-PROFIT, CORP

## Current Principal Place of Business:

820 NORTH MAIN ST  
KISSIMMEE, FL 34744

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 4228  
KISSIMMEE, FL 34742

## New Mailing Address:

820 NORTH MAIN ST  
KISSIMMEE, FL 34744

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARRIOTT, ALICIA  
12420 BLACKSMITH DR  
#301  
ORLANDO, FL 32837 US

## Name and Address of New Registered Agent:

ECHEVARRIA, CARMEN  
1904 FRUITRIDGE STREET  
BRANDON, FL 33510 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: CARMEN M ECHEVARRIA

04/30/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MARRIOTT, ALICIA  
Address: 12420 BLACKSMITH DR  
City-St-Zip: ORLANDO, FL 32837

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VEMURI, MARYEN  
Address: 2216 BLACK LOVE BLVD.  
City-St-Zip: ORLANDO, FL 34787

Title: VP ( ) Change (X) Addition  
Name: ECHEVARRIA, CARMEN M DR.  
Address: 1904 FRUITRIDGE STREET  
City-St-Zip: BRANDON, FL 33510

Title: TRE ( ) Change (X) Addition  
Name: SAAVEDRA, KLEBER  
Address: 2832 RODEO DRIVE  
City-St-Zip: KISSIMMEE, FL 34746

Title: VOC ( ) Change (X) Addition  
Name: MARRIOTT, SILVIO  
Address: 2832 RODEO DRIVE  
City-St-Zip: KISSIMMEE, FL 34746

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: CARMEN M ECHEVARRIA

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date