2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004522

Name:

Address:

City-St-Zip:

Entity Name: EVERYBODY'S ABLE, INC.

FILED Apr 15, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	Y BARTOL FEHALL CIRCL PARK, FL 3279				BARTOL EHALL CIR BARK, FL 32		
Current Mailing Address:				New Mailing Address:			
	Y BARTOL FEHALL CIRCL PARK, FL 3279				BARTOL EHALL CIR BARK, FL 32		
FEI Number:	20-8971796	FEI Number Applied Fo	or () FEI Nui	mber Not Appl	icable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
UNG, DAC V 2200 FAIRGLENN WAY WINTER PARK, FL 32792 US				BARTOL, BRANDY L PD 2481 WHITEHALL CIRCLE WINTER PARK, FL 32792 US			
	named entity s e of Florida.	submits this statement	for the purpose o	of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE: BRANDY L. BARTOL				04/15/2008			
	Electron	ic Signature of Registe	ered Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PD () BARTOL, BRAN 2481 WHITEHA WINTER PARK	LL CIRCLE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () BUCKNER, ADF 2481 WHITEHA WINTER PARK	LL CIRCLE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () WAUGH, LESLI 2619 FAIRWAY WICHITA FALLS	DRIVE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	()	Delete		Title:	ACCT	() Change (X) Addition	

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.

Name:

Address:

City-St-Zip:

UNG, DAC

2200 FAIRGLENN WAY

WINTER PARK, FL 32792

SIGNATURE: BRANDY L. BARTOL PD 04/15/2008