

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005027

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: ALLIANCE FOR DEMOCRACY, INC.

## Current Principal Place of Business:

111 SW 5TH AVENUE  
203  
MIAMI, FL 33130

## New Principal Place of Business:

## Current Mailing Address:

111 SW 5TH AVENUE  
203  
MIAMI, FL 33130

## New Mailing Address:

FEI Number: 31-1677364      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FONT, JOSE A MR.  
9921 COSTA DEL SOL BLVD.  
DORAL, FL 33178      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: CH      ( ) Delete  
Name: FONT, JOSE A MR.  
Address: 9921 COSTA DEL SOL BLVD.  
City-St-Zip: DORAL, FL 33178

Title: VC      ( ) Delete  
Name: SARDINA, EDUARDO M MR.  
Address: 4995 S.W. 78 STREET  
City-St-Zip: MIAMI, FL 33143

Title: PRES      ( ) Delete  
Name: CELAYA, MANUEL MR.  
Address: 12002 ROCKLEDGE DRIVE  
City-St-Zip: BOWIE, MD 20715

Title: SEC.      ( ) Delete  
Name: ESTEVEZ, MATHEW MR.  
Address: 3225 AVIATION AVENUE, SUITE 301  
City-St-Zip: COCONUT GROVE, FL 33133

Title: TREA      ( ) Delete  
Name: GROSS, JORGE MR.  
Address: 1441 BRICKELL AVENUE, SUITE 1100  
City-St-Zip: MIAMI, FL 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSE ANTONIO FONT

CH

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date