2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005332

Address:

City-St-Zip:

4402 N. 4TH ROAD APT 2

ARLINGTON, VA 22203

Entity Name: CITIZEN INTERNATIONAL, INC.

FILED Aug 20, 2009 Secretary of State

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Current Principal Place of Business:		New Prince	New Principal Place of Business:		
901 CLOPPER ROAD SUITE A1 GAITHERSBURG, MD 20878			8211 MAYOR LANE SILVER SPRING, MD 20910		
Current Mailing Address:		New Maili	New Mailing Address:		
901 CLOPPER ROAD SUITE A1 GAITHERSBURG, MD 20878		8211 MAYOR LANE SILVER SPRING, MD 20910			
In accordan	: 26-0559005 FEI Number Applied For () FEI I ce with s. 607.193(2)(b), F.S., the corporation did not receiv I Address of Current Registered Agent:		e.	Certificate of Status Desired () of New Registered Agent:	
	VIRGINIA E ACRES DRIVE FL 32177 US				
	named entity submits this statement for the purpose of Florida.	e of changing	its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PST () Delete MCCOLM, VICTORIA 102 LITTLE ACRES DRIVE PALATKA, FL 32177	Title: Name: Address: City-St-Zip:		(X) Change()Addition /ICTORIA R STREET, NBU 5-14 ON, DC 20024	
Title: Name: Address: City-St-Zip:	CC () Delete PARLETT, E. JILLA 850 N. RANDOLPH ST. #805 ARLINGTON, VA 22203	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	CC () Delete WINDMUELLER, JOHN 9707 MONTAUK AVENUE BETHESDA, MD 20817	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	T () Delete LATAILLE, JOE	Title: Name:		() Change () 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.

Address:

City-St-Zip:

SIGNATURE: VICTORIA MCCOLM PST 08/20/2009