

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006816

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** MARILYN ELORANTA COMMUNITY DEVELOPMENT CENTER, INC

**Current Principal Place of Business:**

1873 SALT MYRTLE LANE  
ORANGE PARK, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

1873 SALT MYRTLE LANE  
ORANGE PARK, FL 32003

**New Mailing Address:**

**FEI Number:** 20-4058475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ELORANTA, MARILYN  
1873 SALT MYRTLE LANE  
ORANGE PARK, FL 32003 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: PD ( ) Delete  
Name: ELORANTA, MARILYN  
Address: 1873 SALT MYRTLE LANE  
City-St-Zip: ORANGE PARK, FL 32003

Title: SD ( ) Delete  
Name: MEJIAS, RENEE  
Address: 711 BELLSHIRE DR.  
City-St-Zip: ORANGE PARK, FL 32065

Title: TD ( ) Delete  
Name: ELORANTA, HARRI  
Address: C/O HARVEY 4834 DE KALB AVENUE  
City-St-Zip: JACKSONVILLE, FL 32007

**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:

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: MARILYN ELORANTA

PRES

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date