

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/ FILED
May 22, 2008 8:00 am
Secretary of State

04-24-2008 90125 042 ****61.25

DOCUMENT # N07000011545 1. Entity Name WORLD CHANGERS OF FLORIDA, INC.					
Principal Place of Business 3823 TAMiami TRAIL EAST PMB #183 NAPLES, FL 34112-6224			Mailing Address 3823 TAMiami TRAIL EAST PMB #183 NAPLES, FL 34112-6224		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 26-222772	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent SHERMAN, WAYNE H 422 COUNTRYSIDE DRIVE NAPLES, FL 34104				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when releasing)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUTHERFORD, JERRY 2023 HARBOR LANE NAPLES, FL 34104 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLEWETT, THERESE 5761 WESTPORT LANE NAPLES, FL 34116 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHERMAN, WAYNE 422 COUNTRYSIDE DRIVE NAPLES, FL 34104 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KELLER, KEN 4441 15TH AVENUE SOUTHWEST NAPLES, FL 34116 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Wayne Sherman</u> Wayne Sherman 4/22/08 229-352-9876 Signature and Typed or Printed Name of Signing Officer or Director					