

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000169

FILED
Apr 30, 2009
Secretary of State

Entity Name: NEW GENERATION OF CITIZENS, INC.

Current Principal Place of Business:

431 LAKEVIEW DR. #104
WESTON, FL 33326

New Principal Place of Business:

431 LAKEVIEW DR.
NO. 104
WESTON, FL 33326

Current Mailing Address:

431 LAKEVIEW DR. #104
WESTON, FL 33326

New Mailing Address:

431 LAKEVIEW DR.
NO. 104
WESTON, FL 33326

FEI Number: 51-0668321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SANCHEZ, NORMAN
16098 WEST STATE ROAD 84
SUNRISE, FL 33326 US

Name and Address of New Registered Agent:

SANCHEZ, NORMAN
431 LAKEVIEW DRIVE
NO. 104
WESTON, FL 33326 US

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: NORMAN SANCHEZ

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANCHEZ, NORMAN
Address: 303 RAQUET CLUB RD, APT #204
City-St-Zip: WESTON, FL 33326

Title: V () Delete
Name: ZABALETA, HANNY
Address: 303 RAQUET CLUB RD. APT #204
City-St-Zip: WESTON, FL 33326

Title: T () Delete
Name: CAVALLO, CARLO
Address: 431 LAKEVIEW DRIVE APT 101
City-St-Zip: WESTON, FL 33326

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: NORMAN SANCHEZ

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date