## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000001473

Entity Name: FRIENDS OF WACERA CORPORATION

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
2196 DRYDEN COURT MELBOURNE, FL 329353825					
Current Mailing Address:			New Mailir	ng Address:	
2196 DRYDEN COURT MELBOURNE, FL 329353825					
FEI Number: 26-1997494 FEI Number Applied For ( ) FEI I			El Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
KAGUNDA, LIANNE N 2196 DRYDEN COURT MELBOURNE, FL 329353825 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:					
	Electron	ic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	, ,		Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition KAGUNDA, LIANNE N CO-FOUN 2196 DRYDEN COURT MELBOURNE, FL 329353825	
Title: Name: Address: City-St-Zip:	. ,		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () NAVRAN, FRAN 23 WHITE DEEI PALM COAST, F	R LANE	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition NAVRAN, FRANK J CHAIR 23 WHITE DEER LANE PALM COAST, FL 32164	
Title: Name: Address: City-St-Zip:	D () NAVRAN, BARB 23 WHITE DEEI PALM COAST, F	R LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LINTON, BARBA 600 JACKSON ( SATELLITE BEA	COURT	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () DUGUID, LARA 1951 FABIEN C MELBOURNE, F		Title: Name: Address: City-St-Zip:	()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.

SIGNATURE: FRANCIS M. KAGUNDA P 02/24/2009