## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000002243

FILED Apr 29, 2009 Secretary of State

Entity Name: WE WILL NOT BE FORGOTTEN ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

14915 OLD HWY 441 #26 14915 OLD HWY 441 LOT #26

TAVARES, FL 32778 TAVARES, FL 32778

**Current Mailing Address: New Mailing Address:** 

14915 OLD HWY 441 #26 P. O. BOX 37

TAVARES, FL 32778 TAVARES, FL 32778

FEI Number: 80-0288153 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LIGHT, MICHAEL LIGHT, MICHAEL R PRES 14915 OLD HWY 441 #26 14915 OLD HWY 441 LOT #26 TAVARES, FL 32778 TAVARES, FL 32778

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: MICHAEL R. LIGHT 04/29/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

LIGHT, MICHAEL LIGHT, MICHAEL Name: Name: 14915 OLD HWY 441 #26 Address: 14915 OLD HWY 441 LOT #26 Address:

City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: ( ) Delete Title: (X) Change ( ) Addition Name: YABROUGH, JOE Name: YABROUGH, JOE

Address: 14915 OLD HWY 441 #45 Address: 14915 OLD HWY 441 LOT #46

City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: **TRES** (X) Change ( ) Addition PANNELLA, CARL PANNELLA, CARL Name: Name:

14915 OLD HWY 441 #22 14915 OLD HWY 441 LOT #7 Address: Address:

City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: SEC. (X) Change ( ) Addition

Name: SNOW, SANDRA Name: SNOW, SANDRA

14915 OLD HWY 441 #12 14915 OLD HWY 441 LOT #12 Address: Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

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: MICHAEL R. LIGHT **PRES** 04/29/2009