2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N08000003865

Entity Name: ACT FOR AMERICA, INC.

Current Principal Place of Business:

6847 N. 9TH AVE., SUITE A #121
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12765
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 26-0772227 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODGERS, GUY
6847 N. 9TH AVE., SUITE A #121
PENSACOLA, FL 32504 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:	D	( ) Delete
Name:	SCHAUBACH, CAROLYN	
Address:	800 S. LYNNHAVEN RD., #411	
City-St-Zip:	VIRGINIA BEACH, VA 23452	
Title:	D	( ) Delete
Name:	TUDOR, CHARLES	
Address:	800 S. LYNNHAVEN RD., #411	
City-St-Zip:	VIRGINIA BEACH, VA 23452	
Title:	D	( ) Delete
Name:	HUDGINS, CRAIG	
Address:	800 S. LYNNHAVEN RD., #411	
City-St-Zip:	VIRGINIA BEACH, VA 23452	
Title:	PT	( ) Delete
Name:	TUDOR, BRIGITTE	
Address:	800 S. LYNNHAVEN RD., #411	
City-St-Zip:	VIRGINIA BEACH, VA 23452	
Title:	S	( ) Delete
Name:	GORDON, JEROME	
Address:	800 S. LYNN HAVEN ROAD., #411	
City-St-Zip:	VIRGINIA BEACH, VA 23452	

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:		
Title:	P	(X) Change ( ) Addition
Name:	TUDOR, BRIGITTE	
Address:	800 S. LYNNHAVEN RD., #411	
City-St-Zip:	VIRGINIA BEACH, VA 23452	
Title:	D	(X) Change ( ) Addition
Name:	FIX, BARBARA	
Address:	800 S. LYNNHAVEN RD., #411	
City-St-Zip:	VIRGINIA BEACH, VA 23452	

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: BRIGITTE TUDOR P 01/12/2009

Electronic Signature of Signing Officer or Director — Date