2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005586

Entity Name: FLORIDA 2.0 INITIATIVE, INC.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	3RD STREET ON, FL 3348		SUITE	621 N.W. 53RD STREET, SUITE 20 BOCA RATON, FL 33487		
Current Mailing Address:				New Mailing Address:		
621 N.W. 53RD STREET, SUITE 260 BOCA RATON, FL 33487				621 N.W. 53RD STREET, SUITE 320 BOCA RATON, FL 33487		
FEI Number:	36-4635057	FEI Number Applied For ()	FEI Number Not	Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C/O BROA 100 N. TAN	G. GEITNER, D AND CASS MPA STREET, 33602 US	EL,				
The above in the State		submits this statement for the pu	urpose of changi	ing its registered o	fice or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ager	nt		Date	
OFFICERS AND DIRECTORS:			ADDIT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () SANCHEZ, ALF 621 NW 53RD (BOCA RATON,	ST #260	Title: Name: Address: City-St-Z	SANCHEZ, ALF 621 NW 53RD 5	ST #320	
Title: Name: Address: City-St-Zip:	GEITNER, CHA	MPA ST., #3500	Title: Name: Address: City-St-Z	:	Change () Addition	
Title: Name: Address: City-St-Zip:	D () DOSTER, MAT 1700 SUMMIT I TALLAHASSEE	AKE DRIVE	Title: Name: Address: City-St-Z	:	Change () Addition	
Title: Name: Address: City-St-Zip:	DT () ECKMANN, DA' 700 UNIVERSE JUNO BEACH,	BOULEVARD	Title: Name: Address: City-St-Z	:	Change () Addition	
Title: Name: Address: City-St-Zip:	FRANK, TOM	Delete REET WEST #303 -L 34207	Title: Name: Address: City-St-Z	:	Change () Addition	
Title: Name:	D () FRENCH, JUDS	Delete SON	Title: Name:	()	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.

Address:

City-St-Zip:

SIGNATURE: ALFREDO SANCHEZ MGR 01/13/2009

127 WEST FAIRBANKS AVENUE 210

WINTER PARK, FL 32789

Address:

City-St-Zip: