

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005728

FILED  
Jan 27, 2009  
Secretary of State

**Entity Name:** UNITED CARIBBEAN CULTURAL ASSOCIATION OF PALM COAST, INC.

**Current Principal Place of Business:**

15 WEIDNER PLACE  
PALM COAST, FL 32164

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 350383  
PALM COAST, FL 321350383

**New Mailing Address:**

**FEI Number:** 26-2704243

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARRISON, CARLTON  
15 WEIDNER PLACE  
PALM COAST, FL 32164 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: P ( ) Delete  
Name: HARRISON, CARLTON  
Address: 15 WEIDNER PLACE  
City-St-Zip: PALM COAST, FL 32164

Title: VP ( ) Delete  
Name: ROBINSON, RONALD  
Address: 2 FLINTHILL LANE  
City-St-Zip: PALM COAST, FL 32137

Title: RE S ( ) Delete  
Name: FINN, BEN  
Address: 14 SEAGULL PLACE  
City-St-Zip: PALM COAST, FL 32164

Title: FI S ( ) Delete  
Name: ROSE, LESLIE  
Address: 30 FERNDAL LANE  
City-St-Zip: PALM COAST, FL 32164

Title: T ( ) Delete  
Name: DIXON, ALVIN  
Address: 13 WESTGATE PLACE  
City-St-Zip: PALM COAST, FL 32164

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PR ( ) Change (X) Addition  
Name: CHONG, TANYA  
Address: 199 BIRCHWOOD DR  
City-St-Zip: PALM COAST, FL 32137

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: ALVIN DIXON

T

01/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date