

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007756

FILED
Jun 22, 2009
Secretary of State

Entity Name: COLLABORATING 4 BETTER FUTURES, INC.

Current Principal Place of Business:

10570 S. FEDERAL HWY., SUITE 300
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

10570 S. FEDERAL HWY., SUITE 300
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 26-3328573 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEMETRIADES, CHRISTINE
10570 S. FEDERAL HWY., SUITE 300
PORT ST. LUCIE, FL 34952 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: () Delete
Name:
Address:
City-St-Zip:

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: DEMETRIADES, CHRISTINE
Address: 10570 S. FEDERAL HWY., SUITE 300
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: VP () Change (X) Addition
Name: BROOKS, LAWRENCE
Address: 10570 S. FEDERAL HWY., SUITE 300
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: DIR () Change (X) Addition
Name: COLLINS, CHAD
Address: 10570 S. FEDERAL HWY., SUITE 300
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: DIR () Change (X) Addition
Name: BARNES, SABRINA
Address: 10570 S. FEDERAL HWY., SUITE 300
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: DIR () Change (X) Addition
Name: PETTIT, GARY
Address: 10570 S. FEDERAL HWY., SUITE 300
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: DIR () Change (X) Addition
Name: GARBOWSKY, KATHRYN
Address: 10570 S. FEDERAL HWY., SUITE 300
City-St-Zip: PORT ST. LUCIE, FL 34952

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: CHRISTINE DEMETRIADES

PRES

06/22/2009

Electronic Signature of Signing Officer or Director

Date