2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007787

FILED Mar 30, 2009 Secretary of State

Entity Name: BRAZIL-JACKSONVILLE ALLIANCE OF NORTH EAST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 226-5 SOLANA ROAD PONTA VEDRA BEACH, FL 32082 LIS **Current Mailing Address: New Mailing Address:** 226-5 SOLANA ROAD PONTA VEDRA BEACH, FL 32082 US FEI Number: 26-3216120 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: STRAHL, GARRETT J 7563 PHÍLIPS HWY. STE. 202 JACKSONVILLE, FL 32256 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition RODRIGGS, JOSHUA Name: Name: 226-5 SOLANA ROAD Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: Title: Title: BVP (X) Change () Addition () Delete BUCKLEY, BRANDON Name: BUCKLEY, BRANDON Name: Address: 226-5 SOLANA ROAD Address: 226-5 SOLANA ROAD City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: PONTE VEDRA BEACH, FL 32082 US Title: AVP () Delete Title: **BVP** (X) Change () Addition GRUNER, DERRICK B GRUNER, DERRICK B Name: Name: 7563 PHILIPS HWY. STE. 202 7563 PHILIPS HWY. STE. 202 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US () Delete Title: **TRES** Title: () Change () Addition Name: LEE, ADRIANA Name: Address: 226-5 SOLANA ROAD Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: SECR () Delete Title: () Change () Addition HOTCHKISS, MEGHAN Name: Name: 226-5 SOLANA ROAD Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip:

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: JOSHUA RODRIGGS PRES 03/30/2009