2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009852

FILED Feb 01, 2009 Secretary of State

Entity Name: ALLIANCE FOR WEEDON ISLAND ARCHAEOLOGICAL RESEACH AND EDUCATION, INC.

urrent F	Principal Place of	Business:	New Principal Place	e of Business:
	EDON DRIVE NE :RSBURG, FL 337(02 US		
Current Mailing Address:		New Mailing Address:		
	EDON DRIVE NE :RSBURG, FL 337(02 US		
El Numbei	r: 26-3597828 F	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of Curr	ent Registered Agent:	Name and Address	of New Registered Agent:
224 ALA IVERVIE	,	IS	ourness of changing its registers	
	te of Florida.	This this statement for the p	ourpose of changing its registers	ed office or registered agent, or both,
	te of Florida.	nits this statement for the p	ourpose or changing its registers	ed office of registered agent, or both,
the Stat	te of Florida. IRE:	Signature of Registered Age		Date
the Stat	te of Florida. IRE:	Signature of Registered Age	ent	
the Stat IGNATU FFICER tle: ame: ddress:	te of Florida. IRE: Electronic S	Signature of Registered Age RS: ete R E	ent	Date
the Stat IGNATU FFICER ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	te of Florida. Flectronic S S AND DIRECTOR P	Signature of Registered Age RS: ete R E , FL 33617 US ete K AVE. N.	ent ADDITIONS/CHANG Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR
the Stat	te of Florida. JRE: Electronic S RS AND DIRECTOF P () Dele WEISMAN, BRENT I 717 GRAND CIRCLI TEMPLE TERRACE VP () Dele STEWART, SHEILA 2130 BURLINGTON ST. PETERSBURG, T () Dele AUSTIN, ROBERT J 7224 ALAFIA RIDGE	Signature of Registered Age RS: ete R E , FL 33617 US ete K AVE. N. FL 33713 US ete	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR () 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.

SIGNATURE: ROBERT J AUSTIN T 02/01/2009