

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 06, 2010
Secretary of State

Entity Name: POWE FAMILY ASSOCIATION INC.

Current Principal Place of Business:

3684 JULIET LEIA CIRCLE SOUTH
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

3684 JULIET LEIA CIRCLE SOUTH
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 80-0301728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWE, BERTHA L
3684 JULIET LEIA CIRCLE SOUTH
JACKSONVILLE, FL 32218 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: D
Name: POWE, FLOYD
Address: 3684 JULIET LEIA CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: POWE, BERTHA L
Address: 3684 JULIET LEIA CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: DAVIDSON, SHEILA
Address: 11397 BLOSSOM RIDGE DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

I hereby 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 all other like empowered.

SIGNATURE: BERTHA L POWE

MRS

01/06/2010

Electronic Signature of Signing Officer or Director

Date