2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010437

14481 SW 161 STREET

MIAMI, FL 33177

Address:

City-St-Zip:

FILED Feb 10, 2009 Secretary of State

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Entity Nar	ne: THE GILE	D FOUNDATION, INC.			
Current P	rincipal Place	of Business:	New Principal Place	of Business:	
18539 SW MIAMI, FL	133RD AVEN 33177	UE			
Current Mailing Address:			New Mailing Address:		
20458 OLE SUITE 181 MIAMI, FL		AD			
FEI Number:	26-3692431	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:					
18539 SW MIAMI, FL				d affice are registered asset as both	
	named entity s of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () DESSALINES, 18539 SW 133 MIAMI, FL 331	RD AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () DESSALINES, I 18539 SW 133 MIAMI, FL 331	RD AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SEC ()	Delete NOLKA	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: GESTON DESSALINES PRES 02/10/2009