

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010782

FILED  
Mar 26, 2009  
Secretary of State

**Entity Name:** LAUGH AT CANCER ORGANIZATION, INC.

**Current Principal Place of Business:**

9842 103RD ST LOT 32  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

9842 103RD ST LOT 32  
JACKSONVILLE, FL 32210

**New Mailing Address:**

PO BOX 7332  
JACKSONVILLE, FL 32238

**FEI Number:** 26-3779082

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

KAUFFMAN, CRYSTAL  
9842 103RD ST LOT 32  
JACKSONVILLE, FL 32210 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: DP ( ) Delete  
Name: KAUFFMAN, CRYSTAL  
Address: 9842 103RD ST LOT 32  
City-St-Zip: JACKSONVILLE, FL 32210

Title: DVP ( ) Delete  
Name: AMOM, RAY  
Address: 9842 103RD ST LOT 32  
City-St-Zip: JACKSONVILLE, FL 32210

Title: DT ( ) Delete  
Name: WAHLSTROM, ERIC  
Address: 9842 103RD ST LOT 32  
City-St-Zip: JACKSONVILLE, FL 32210

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: KAUFFMAN, CRYSTAL  
Address: 9842 103RD ST LOT 32  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP (X) Change ( ) Addition  
Name: AMON, RAY  
Address: 9842 103RD ST LOT 32  
City-St-Zip: JACKSONVILLE, FL 32210

Title: T (X) Change ( ) Addition  
Name: JESTER, MATT  
Address: 9842 103RD ST LOT 32  
City-St-Zip: JACKSONVILLE, FL 32210

Title: S ( ) Change (X) Addition  
Name: JESTER, TERRI  
Address: 9842 103RD ST. LOT32  
City-St-Zip: JACKSONVILLE, FL 32210

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: CRYSTAL KAUFFMAN

P

03/26/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date