

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011386

FILED
Sep 08, 2009
Secretary of State

Entity Name: FLORIDA COMMUNITY ALLIANCE, INC.

Current Principal Place of Business:

17851 BRIDLE LANE
JUPITER, FL 33478

New Principal Place of Business:

Current Mailing Address:

17851 BRIDLE LANE
JUPITER, FL 33478

New Mailing Address:

16764 121ST TERRACE NORTH
JUPITER, FL 33478-600

FEI Number: 90-0433146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KRAMER, SCOTT ESQ
6650 WEST INDIANTOWN ROAD SUITE 200
JUPITER, FL 33458 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 () Delete
Name: KING, MINERVA M
Address: 16764 121ST TERRACE W
City-St-Zip: JUPITER, FL 33478

Title: D () Delete
Name: ZACCHEO, ROBERT
Address: 643 SE HARBORVIEW DR.
City-St-Zip: PORT ST LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CHARLENE G ROWE

D

09/08/2009

Electronic Signature of Signing Officer or Director

Date