

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009488

FILED
Jan 06, 2010
Secretary of State

Entity Name: SELF EMPOWERMENT SERVICES INC.

Current Principal Place of Business:

1144 15TH ST
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

1144 15TH ST
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 80-0488902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERTINENT, WELSINA P
1144 15TH STREET
ORANGE CITY, FL 32763 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: P
Name: ROBINSON, CLARENDON J
Address: 2804 N JULIET DRIVE
City-St-Zip: DELTONA, FL 32738

Title: VP
Name: FORBES, ERMA E
Address: 1144 15 ST
City-St-Zip: ORANGE CITY, FL 32763

Title: ST
Name: FORBES, CHANTAL E
Address: 2804 N JULIET DRIVE
City-St-Zip: DELTONA, FL 32738

Title: D
Name: MORGAN, ALYWYN
Address: 801 STATE RD 436
City-St-Zip: ALTOMANTE SPRINGS, FL 32771

Title: D
Name: COX, JOSEPHINE
Address: 2600 GEORGIA AVE
City-St-Zip: SANFORD, FL 32773

Title: D
Name: PERTINENT, WELSINA P
Address: 755 W WASHINGTON AVE
City-St-Zip: LAKE HELEN, FL 32744

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: ERMA FORBES

VP

01/06/2010

Electronic Signature of Signing Officer or Director

Date