

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003798

FILED
Feb 27, 2012
Secretary of State

Entity Name: BEAUTIFUL BUTTERFLIES MENTORING PROGRAM INC.

Current Principal Place of Business:

2641 LEGACY VILLAS DRIVE
MAITLAND, FL 32751

New Principal Place of Business:

2448 VINEYARD CIRCLE
SANFORD, FL 32771

Current Mailing Address:

PO BOX 2594
EATONVILLE, FL 32751

New Mailing Address:

FEI Number: 45-1841875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRAZIER, LYNDORA
2641 LEGACY VILLAS DRIVE
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

FRAZIER, LYNDORA
2448 VINEYARD CIRCLE
SANFORD, FL 32771 US

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: LYNDORA FRAZIER

02/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FRAZIER, EDWARD D
Address: 2448 VINEYARD CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: VD
Name: FRAZIER, LYNDORA
Address: 2448 VINEYARD CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: ST
Name: HIPPEARD, JANET M
Address: 1751 PRESIDIO DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: D
Name: PLATT, TAMARA
Address: 1751 PRESIDIO DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: D
Name: MITIL, SOPHI
Address: 1547 CROYDON STREET
City-St-Zip: ORALNDO, FL 32828

Title: D
Name: ARROYO, MILLIE C
Address: 2746 TALLY HO AVE
City-St-Zip: ORLANDO, FL 32826

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: LYNDORA FRAZIER

VD

02/27/2012

Electronic Signature of Signing Officer or Director

Date