2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15560

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	H AVE WEST O, FL 34221	US			
urrent N	lailing Addres	ss:	New Mailing Addres	ss:	
	H AVE WEST O, FL 34221	US			
El Number	: 59-2770897	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
IATHEW	'S SR, TALMAD)GF I			
489 17TI ALMETT	H STREET WE O, FL 34221				
ALMETT	H STREET WE O, FL 34221	ST US	ourpose of changing its registere	ed office or registered agent, or both,	
ALMETT	H STREET WE O, FL 34221 e named entity s e of Florida. RE:	ST US submits this statement for the p		ed office or registered agent, or both,	
ALMETT he above the Stat	H STREET WE O, FL 34221 e named entity s e of Florida. RE:	ST US		ed office or registered agent, or both, Date	
ALMETT he above the Stat IGNATU	H STREET WE O, FL 34221 e named entity s e of Florida. RE:	ST US submits this statement for the particle of Registered Ag	ent		
ALMETT he above the Stat IGNATU	e named entity e of Florida. RE: Electror S AND DIREC	ST US submits this statement for the particle Signature of Registered Age TORS: Delete DEWITT T N DR	ent	Date	
ALMETT he above the Stat IGNATU FFICER tte: ame: ddress:	e named entity se of Florida. RE: Electror S AND DIREC DV () MATHEWS JR, 1406 ROSSLYI PALMETTO, FL	ST US submits this statement for the partic Signature of Registered Ag TORS: Delete DEWITT T DR 34221 Delete TALMADGE L REET WEST	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	

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: TALMADGE L MATHEWS SR DP 04/01/2009