2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24079

FILED Apr 15, 2009 Secretary of State

Entity Name: THE FLORIDA DISTRICT OF THE UNITARIAN UNIVERSALIST ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1901 E ROBINSON ST STE. 18

ORLANDO, FL 32803 US

Current Mailing Address: New Mailing Address:

1901 E ROBINSON ST STE. 18

ORLANDO, FL 32803 US

FEI Number: 59-3451507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HURTO, KENNETH G REV 1901 E ROBINSON ST STE. 18 ORLANDO, FL 32803 US

OFFICERS AND DIRECTORS:

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

Electronic Olghature of Negistered

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 CARVER, JENNIFER
 Name:
 CARVER, JENNIFER Z

 Address:
 1608 REDWOOD DRIVE
 Address:
 514 E. CAROLINA STREET

Address: 1608 REDWOOD DRIVE Address: 514 E. CAROLINA STREET City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32303

Title: V () Delete Title: () Change () Addition Name: CHRISTENSEN, RACHEL Name:

Address: 412 MEAD DRIVE Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 BODE, WILLIAM
 Name:
 WELLS, FRANK

 Address:
 562801 ARBOR CLUB WAY
 Address:
 2470 NURSERY ROAD

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:
 CLEARWATER, FL 33764

Title: S () Delete Title: S (X) Change () Addition

 Name:
 PITKIN, STEPHEN
 Name:
 JOYNER, LORAKIM REV.

 Address:
 1480 E 13TH STREET
 Address:
 4225 NW 34TH STREET

 City-St-Zip:
 STUART, FL 34996
 City-St-Zip:
 GAINESVILLE, FL 32605

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: JENNIFER Z. CARVER P 04/15/2009