2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30289

FILED Mar 26, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
	NE RIVER RD: FON, FL 34203					
Current Mailing Address:			New Mailing Address:			
	ITVILLE RD FA, FL 34232					
El Number	: 65-0162247	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of S	Status Desired ()	
lame and	d Address of C	urrent Registered Agent:	Name and	Address of New Registere	ed Agent:	
672 FRU	NDO MGMT ITVILLE RD FA. FL 34232	US				
	7,12 04202					
	,	submits this statement for the p	ourpose of changing	its registered office or registe	ered agent, or bot	
n the Stat	e named entity se e of Florida.	submits this statement for the p	ourpose of changing	its registered office or registe	ered agent, or bot	
the Stat	e named entity see of Florida.	submits this statement for the particles in the particles of Signature of Registered Against Against Signature of Registered Against Signature Office Registered Against Signature Register		its registered office or registe	ered agent, or bot	
n the Stat SIGNATU	e named entity see of Florida.	ic Signature of Registered Age	ent			
n the Stat	e named entity se of Florida. RE: Electron S AND DIREC	ic Signature of Registered Age TORS: Delete AVID VER RD #307	ent	Date	S AND DIRECT	
n the Stati SIGNATU DFFICER itle: lame: ddress:	e named entity se of Florida. RE: Electron S AND DIRECTOR P () MRAKOVICH, D 6507 STONE RI BRADENTON, F	ic Signature of Registered Age TORS: Delete AVID VER RD #307 1. 34203 Delete RALPH IVER RD. #301	ent ADDITIOI Title: Name: Address:	Date NS/CHANGES TO OFFICER	S AND DIRECT	
n the State GRATU PFFICER itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	e named entity se of Florida. RE: Electron S AND DIRECTOR P () MRAKOVICH, D 6507 STONE RI BRADENTON, F T () HOLLMEYER, F 6503 STONE RI BRADENTON, F	ic Signature of Registered Age TORS: Delete AVID IVER RD #307 L 34203 Delete RALPH IVER RD. #301 L 34203 Delete K IVER RD #304	ent ADDITIOI Title: Name: Address: City-St-Zip: Title: Name: Address:	Date NS/CHANGES TO OFFICER () Change () Add T (X) Change () Add BRYAN, JIM 6503 STONE RIVER RD. #108	S AND DIRECT	

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: DAVE MRAKOVICH PD 03/26/2009