2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 05, 2008
Secretary of State

DOCUMENT# N35927

Entity Name: PORTUGUESE AMERICAN CULTURAL CENTER OF PALM COAST, INC.

Current Principal Place of Business:

1200 PALM HARBOR PARKWAY
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

1200 PALM HARBOR PARKWAY
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3078703 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOMINGUES, SILVERIO
1200 PALM HARBOR PARKWAY
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

DACOSTA, GUS
1200 PALM HARBOR PARKWAY
PALM COAST, FL 32137 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: GUS DACOSTA 05/05/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DOMINGUES, SILVERIO
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

Title: VP ( ) Delete
Name: AFONSO, ANTONIO
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

Title: SD ( ) Delete
Name: ALMEIDA, JOAO
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

Title: TD ( ) Delete
Name: PINTO, ANTHONY
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DACOSTA, GUS
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change ( ) Addition
Name: PESO, ROGERIO
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

Title: SD (X) Change ( ) Addition
Name: ATAIDE, ROSA
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

Title: TD (X) Change ( ) Addition
Name: PRATA, PAULA
Address: 1200 PALM HARBOR PARKWAY
City-St-Zip: PALM COAST, FL 32137

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: GUS DACOSTA PD 05/05/2008
Electronic Signature of Signing Officer or Director Date