2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37976

FILED Jun 17, 2009 Secretary of State

Entity Name: PEOPLE ACTING FOR COMMUNITY TOGETHER, INC.

Current Principal Place of Business: New Principal Place of Business: 250 NE 17TH TERRACE 316 NE 26 TERRACE MIAMI, FL 33132 MIAMI, FL 33137 **Current Mailing Address: New Mailing Address:** 250 NE 17TH TERRACE 316 NE 26 TERRACE MIAMI, FL 33132 MIAMI, FL 33137 FEI Number: 65-0080062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOLIVAR, WILLY CONELY, MARGARET 250 NE 17TH TERRACE 316 NE 26 TERRACE MIAMI, FL 33132 MIAMI, FL 33137 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: MARGARET CONELY 06/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BOLIVAR, WILFREDO CONELY, MARGARET Name: Name: 280 NE 17TH TERRACE Address: 316 NE 26 TERRACE Address: MIAMI, FL 33133 US City-St-Zip: City-St-Zip: MIAMI, FL 33137 US Title: Title: () Delete () Change () Addition Name: NICHOLAS, JOSEPH REV Name: Address: 1880 NW 183 ST Address: MIAMI GARDENS, FL 33056 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition VINCIGUERRA, ANTHONY Name: Name: 16401 NW 37 AVENUE Address: Address: City-St-Zip: MIAMI GARDENS, FL 33054 US City-St-Zip: Title: () Delete Title: () Change () Addition BONY, HERVE Name: Name: 2001 NW 35TH STREET Address: Address: City-St-Zip: MIAMI, FL 33142 US City-St-Zip: Title: VPM () Delete Title: **VPMS** (X) Change () Addition FRANCOIS, EMMA FRANCOIS, EMMA Name: Name: 8252 NW 198TH STREET 8252 NW 198TH STREET Address: Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: MIAMI, FL 33015 Title: () Delete Title: () Change () Addition CAPERS, JOREATHA M Name: Name: Address: 2001 NW 35TH STREET Address: MIAMI, FL 33142 City-St-Zip: City-St-Zip:

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: MARGARET CONELY MD 06/17/2009