2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46248

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:			
	CARTHUR AV CITY, FL 3240				
Current Mailing Address:		New Mailing Address:			
	CARTHUR AV CITY, FL 3240				
El Number	: 59-6018997	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:	
	DELORES				
	COHANTAS ST CITY, FL 3240				
PANAMA The above	CITY, FL 3240	1 US	purpose of changing its registere	ed office or registered agent, or both,	
PANAMA The above	CITY, FL 3240 e named entity e of Florida. RE:	of US submits this statement for the		ed office or registered agent, or both,	
PANAMA The above In the Stat	CITY, FL 3240 e named entity e of Florida. RE:	1 US		ed office or registered agent, or both, Date	
PANAMA The above the State SIGNATU	CITY, FL 3240 e named entity e of Florida. RE:	ut US submits this statement for the nic Signature of Registered Ag	ent		
PANAMA The above the Stat SIGNATU	e named entity e of Florida. RE: Electror	submits this statement for the nic Signature of Registered Ag TORS: Delete DRES NTAS ST	ent	Date	
PANAMA The above In the State SIGNATU DFFICER ittle: lame: ddress:	e named entity e of Florida. RE: Electror S AND DIREC T MINCEY, DELC 7105 POCAHAI PANAMA CITY,	submits this statement for the nic Signature of Registered Ag TORS: Delete DRES NTAS ST FL 32401 Delete E DOD DRN	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: DELORES MINCEY TREA 03/24/2009