

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49380

FILED
Mar 24, 2009
Secretary of State

Entity Name: GENERACION DE FE, INC.

Current Principal Place of Business:

1840 N. GOLDENROD RD.
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

1840 N. GOLDENROD RD.
ORLANDO, FL 32807

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ - APONTE, JOAQUIN
10712 CYPRESS TRAIL DR.
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEREZ-APONTE, JOAQUIN
Address: 10712 CYPRESS TRAIL DR.
City-St-Zip: ORLANDO, FL 32825

Title: TTR () Delete
Name: TIRADO, ELSIE
Address: 5719 DOGWOOD ST
City-St-Zip: ORLANDO, FL 32807

Title: TR () Delete
Name: GARCIA, MILAGROS
Address: 7613 ACADIAN DR
City-St-Zip: ORLANDO, FL 32822

Title: TR () Delete
Name: MORA, JUAN
Address: 4208 F.T. CONRAGE CIR.
City-St-Zip: KISSIMMEE, FL 34746

Title: S () Delete
Name: MARCANO, NANCY
Address: 2023 PURITAN RD
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JOAQUIN PEREZ-APONTE

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date