2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N49669

Entity Name: PILIPINO-AMERICAN POLITICAL AGGREGATION, INC.

Current Principal Place of Business:

16409 ASHWOOD DR.
TAMPA, FL 336241152 US

New Principal Place of Business:

Current Mailing Address:

16409 ASHWOOD DR.
TAMPA, FL 336241152 US

New Mailing Address:

FEI Number: 59-3131501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUELO, ROBERTO R.
16409 ASHWOOD DRIVE
TAMPA, FL 336241152 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:	PD	( ) Delete
Name:	ALMEDA, BERT A	
Address:	15913 MYSTIC WAY	
City-St-Zip:	TAMPA, FL 336246815 US	
Title:	DVPR	( ) Delete
Name:	PARROCHA, CRETENCE S	
Address:	507 GOODWOOD DR	
City-St-Zip:	LUTZ, FL 33549 US	
Title:	DVPR	( ) Delete
Name:	LAO, JOSEPH A	
Address:	816 W DR MARTIN LUTHER KING JR BLVD	
City-St-Zip:	TAMPA, FL 336033302 US	
Title:	DVPD	( ) Delete
Name:	YOUNG, ROLAND	
Address:	24249 SILKBAY COURT	
City-St-Zip:	LUTZ, FL 33559 US	
Title:	SD	( ) Delete
Name:	RUELO, ROBERTO R	
Address:	16409 ASHWOOD DR	
City-St-Zip:	TAMPA, FL 336241152 US	
Title:	TD	( ) Delete
Name:	CATANIA, LARRY	
Address:	2400 SHERWOOD LANE	
City-St-Zip:	CLEARWATER, FL 33769 US	

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:	
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: BERT A ALMEDA P 04/29/2009

Electronic Signature of Signing Officer or Director — Date