

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001579

FILED
Jan 18, 2009
Secretary of State

Entity Name: FIRST COAST REGION MARC/MAFCA, INC.

Current Principal Place of Business:

2152 GINHOUSE DR
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

24777 GROVE STREET
LAWTEY, FL 32058 US

Current Mailing Address:

5949 SHELLY LANE
MACCLENNEY, FL 32063 US

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:

COLLIER, PATRICIA
5949 SHELLY LN
MACCLENNEY, FL 32063 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: D () Delete
Name: COLLIER, PATRICIA
Address: 5949 SHELLY LN
City-St-Zip: MACCLENNEY, FL 32063

Title: D () Delete
Name: HOUGHIN, SHIRLEY
Address: 14155 MT. PLEASANT ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: HOLSAPFEL, PAUL
Address: 2152 GIRHOUSE DR
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: BECKER, LES
Address: 24777 GROVE ST
City-St-Zip: LAWTEY, FL 32058

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: COLLIER, PATRICIA
Address: 5949 SHELLY LN
City-St-Zip: MACCLENNEY, FL 32063

Title: O (X) Change () Addition
Name: HOUGHIN, SHIRLEY
Address: POST OFFICE BOX 75
City-St-Zip: WELAKA, FL 32193 US

Title: O (X) Change () Addition
Name: CHAMBERS, HAROLD
Address: 3304 TALISMAN DRIVE
City-St-Zip: MIDDLEBURG, FL 32068

Title: O/D (X) Change () Addition
Name: BECKER, LES
Address: 24777 GROVE ST
City-St-Zip: LAWTEY, FL 32058

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: PATRICIA COLLIER

O

01/18/2009

Electronic Signature of Signing Officer or Director

Date