2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005608

FILED Apr 29, 2009 Secretary of State

Entity Name: WAR BABIES ASSOCIATION OF AMERICA, INC.

O 4 D	incinal Disco	of Dunings	New Principal Place	of Ducinosa.	
	-	of Business:	New Principal Place	or business:	
1207 E. MA TAMPA, FL		R KING, JR. BLVD.			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1207 E. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603		1207 E. MARTIN LUT TAMPA, FL 33603	1207 E. MARTIN LUTHER KING, JR. BLVD. TAMPA, FL 33603 US		
FEI Number:	59-3449120	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1207 E. MA TAMPA, FL	. 33603 US		rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR					
010117 (1011		ic Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () BEASLEY, STE 2610 POTTSDA TALLAHASSEE	MER STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WESLEY, NATH 9511 STAR VIE TALLAHASSEE	W LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MOALES, ROBI 3778 GUILFOR DECATUR, GA	D COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D, P () NORWOOD, JR 714 BROOKRIE TALLAHASSEE	GE STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SISSLE, JR., NO POST OFFICE I TAMPA, FL 336	BOX 1217	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WARD, JOHN V 3015 HAWKS L TALLAHASSEE	ANDING DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NOBLE L. SISSLE, JR. DIR 04/29/2009