2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003512

FILED Apr 30, 2008 Secretary of State

Entity Name: EXPANDING AND PRESERVING OUR CULTURAL HERITAGE, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	TH AVENUE EACH, FL 33444	US			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	TH AVENUE EACH, FL 33444	US			
FEI Number:	65-0687303 FE	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
FARRINGTON, VERA R 310 NW 2ND AVE DELRAY BEACH, FL 33444 US					
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 Si	gnature of Registered Agen	t	Date	
OFFICERS	AND DIRECTOR	S:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delet FARRINGTON, VERA 310 NW 2ND AVE DELRAY BEACH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	SD () Delet HOWARD, KENNETH 5225 RAYMOND DR BOYNTON BEACH, F	N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delet VAUGHN, CLARENCE 17650 WOODVIEW T BOCA RATON, FL 33	E ERR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT () Delet VAUGHN, CLARRENG 17650 WOODVIEW T BOCA RATON, FL 33	CE ERR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet STRAGHN, ALFRED 26 SW 5TH AVE DELRAY BEACH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delet REINGOLD, MARK 107 MACFARLANE D DELRAY BEACH, FL	RIVE	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: VERA R. FARRINGTON PD 04/30/2008