2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# N97000000596

Entity Name: POSITIVE IMAGE COMMITTEE, INC.

Current Principal Place of Business:

12317 LANGSHAW DR
THONOTOSASSA, FL 33592

New Principal Place of Business:

Current Mailing Address:

12317 LANGSHAW DR
THONOTOSASSA, FL 33592

New Mailing Address:

FEI Number: 59-3478070 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PALMER, DARRELL T
12317 LANGSHAW DR
THONOTOSASSA, FL 33592 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: VD ( ) Delete
Name: FORWARD, THOMAS
Address: 19501 COACHLIGHT WAY
City-St-Zip: LUTZ, FL 33549

Title: PD ( ) Delete
Name: PALMER, DARRELL T
Address: 12317 LANGSHAW DRIVE
City-St-Zip: THONOTOSASSA, FL 33592

Title: SD ( ) Delete
Name: FORWARD, CYNTHIA M
Address: 19501 COACHLIGHT WAY
City-St-Zip: LUTZ, FL 33549

Title: T ( ) Delete
Name: PALMER, DARRELL T
Address: 12317 LANGSHAW DR
City-St-Zip: THONOTOSASSA, FL 33592

Title: PA ( ) Delete
Name: BRADLEY, TWANDA E
Address: 7927 PINE DRIVE
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PALMER, DARRELL
Address: 12317 LANGSHAW DR
City-St-Zip: THONOTOSASSA, FL 33592

Title: VD (X) Change ( ) Addition
Name: FORWARD, THOMAS
Address: 19501 COACHLIGHT WAY
City-St-Zip: LUTZ, FL 33549

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: DARRELL PALMER PD 05/06/2009

Electronic Signature of Signing Officer or Director — Date