2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000267

FILED Apr 04, 2009 Secretary of State

Entity Name: ARMENIAN AMERICAN CULTURAL SOCIETY OF SW FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

NAPLES, FL 749 BENTWATER CIRCLE

749 BENTWATER SUITE 201 SUITE 201 NAPLES, FL 34108 NAPLES, FL 34108

New Mailing Address: Current Mailing Address:

749 BENTWATER CIRCLE 749 BENTWATER SUITE 201 SUITE 201 NAPLES, FL 34108 NAPLES, FL 34108 US

FEI Number: 65-0808841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DOMENIE, JOHAN DOMENIE, JOHAN 749 BENTWATER CIRCLE #201 749 BENTWATER CIRCLE #201

NAPLES, FL 341088232 US NAPLES, FL 34108

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: 04/04/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition DOMENIE, MAIDA G DOMENIE, MAIDA G Name: Name:

749 BENTWATER CIR 201 Address: 749 BENTWATER CIR #201 Address: City-St-Zip: NAPLES, FL 341086762 City-St-Zip: NAPLES, FL 341086762

(X) Change () Addition Title: () Delete Title: HAROOTUNIAN, MAGARET Name: HAROOTUNIAN, MAGARET Name: Address: 625 LALIQUE CIRCLE #1402 Address: 625 LALIQUE CIRCLE #1402

City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119

Title: () Delete Title: DMP (X) Change () Addition NAHABEDIAN, MARK NAHABEDIAN, MARK Name: Name: 320 SEAVIEW CT 1404 Address:

320 SEAVIEW CT #1404 Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145

Title: () Delete Title: S/TR (X) Change () Addition

Name: DOMENIE, JOHN Name: DOMENIE, JOHAN 749 BENTWATER CIR 201 Address: Address: 749 BENTWATER CIR #201 City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

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: JOHAN DOMENIE S/TR 04/04/2009