

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000001264

FILED
Mar 24, 2009
Secretary of State

Entity Name: FLORIDA FEDERATION OF COLORGUARDS CIRCUIT, INC

Current Principal Place of Business:

22931 HAWK HILL LOOP
LAND O LAKES, FL 34639 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 162564
ALTAMONTE SPRINGS, FL 32716 US

New Mailing Address:

PO BOX 156
APOPKA, FL 32704 US

FEI Number: 59-3149277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAREN, KENNEY M
22931 HAWK HILL LOOP
LAND O LAKES, FL 34639 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BROWN, ELIZABETH
Address: 271 STERLING SPRING LANE
City-St-Zip: ALTIMOMTE SPRINGS, FL 32714

Title: P () Delete
Name: HIGBE, MICHAEL A
Address: 1688 GUM TREE COURT
City-St-Zip: ORANGE PARK, FL 32073

Title: T () Delete
Name: KENNEY, KAREN
Address: 8787 SOUTHSIDE BLVD APT 2802
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: KENNEY, KAREN
Address: 22931 HAWK HILL LOOP
City-St-Zip: LAND O LAKES, FL 34639

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN M KENNEY

TRES

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date