

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008319

FILED
Apr 20, 2009
Secretary of State

Entity Name: IAEN, INC.

Current Principal Place of Business:

1170 N. E. CLEVELAND ST.
CLEARWATER, FL 33755

New Principal Place of Business:

1170 NE CLEVELAND ST
CLEARWATER, FL 33755

Current Mailing Address:

1170 N. E. CLEVELAND ST.
CLEARWATER, FL 33755

New Mailing Address:

1170 NE CLEVELAND ST
CLEARWATER, FL 33755

FEI Number: 26-0547836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOZES, NATALIE A
1101 S. EVERGREEN AVE.
CLEARWATER, FL 33756 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: P () Delete
Name: MAREN, ARTE
Address: 1170 N.E. CLEVELAND ST.
City-St-Zip: CLEARWATER, FL 33755

Title: VP () Delete
Name: ULAN, FREDDIE
Address: 1170 N.E. CLEVELAND ST.
City-St-Zip: CLEARWATER, FL 33755

Title: T () Delete
Name: BURNES, ROBIN
Address: 1170 N. E. CLEVELAND ST.
City-St-Zip: CLEARWATER, FL 33755

Title: S () Delete
Name: GOULD, JULIA
Address: 1170 NE CLEVELAND ST
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAREN, ARTE
Address: 1170 NE CLEVELAND ST
City-St-Zip: CLEARWATER, FL 33755

Title: VP (X) Change () Addition
Name: ULAN, FREDDIE
Address: 1170 NE CLEVELAND ST
City-St-Zip: CLEARWATER, FL 33755

Title: T (X) Change () Addition
Name: BURNES, ROBIN
Address: 1170 NE CLEVELAND ST
City-St-Zip: CLEARWATER, FL 33755

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: ROBIN BURNES

T

04/20/2009

Electronic Signature of Signing Officer or Director

Date