

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N07000011380

Entity Name: CO K 28TH GA INF INC

Current Principal Place of Business:

6497 ALLEGHENY AV
COCOA, FL 32927 US

New Principal Place of Business:

Current Mailing Address:

6497 ALLEGHENY AV
COCOA, FL 32927 US

New Mailing Address:

FEI Number: 26-1473608 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:

HACKEL, DAVID H
6497 ALLEGHENY AVE
COCOA, FL 32927 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: HACKEL, DAVID H
Address: 6497 ALLEGHENY AV
City-St-Zip: COCOA, FL 32927 US

Title: VP () Delete
Name: FIDDLER, JEFF
Address: 2121 WILLOW OAK DR
City-St-Zip: EDGEWATER, FL 32141 US

Title: T () Delete
Name: FLEISCHMAN, FRANK L
Address: 557 LAKE COMO DR
City-St-Zip: POMONA PARK, FL 32181 US

Title: SEC () Delete
Name: FLEISHMAN, MICHELA
Address: 557 LAKE COMO DR
City-St-Zip: POMONA PARK, FL 32181

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: FLEISCHMAN, FRANK L
Address: 455 OLD HWY 17
City-St-Zip: CRESCENT CITY, FL 32112 US

Title: SEC (X) Change () Addition
Name: FLEISCHMAN, MICHELA
Address: 455 OLD HWY 17
City-St-Zip: CRESCENT CITY, FL 32112

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: FRANK FLEISCHMAN

TREA

05/04/2009

Electronic Signature of Signing Officer or Director

_____ Date