

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 24, 2008
Secretary of State

DOCUMENT# 751965

Entity Name: ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION, SOUTHEAST FLORIDA
CHAPTER, INC.**Current Principal Place of Business:**4700 NORTH CONGRESS AVENUE
SUITE 101
WEST PALM BEACH, FL 33407**New Principal Place of Business:**3333 FOREST HILL BLVD
WEST PALM BEACH, FL 33406**Current Mailing Address:**4700 NORTH CONGRESS AVENUE
SUITE 101
WEST PALM BEACH, FL 33407**New Mailing Address:**3333 FOREST HILL BLVD
WEST PALM BEACH, FL 33406**FEI Number:** 59-2008883**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BROWN, ELLEN
4700 NORTH CONGRESS AVENUE
SUITE 101
WEST PALM BEACH, FL 33407 US**Name and Address of New Registered Agent:**BROWN, ELLEN
3333 FOREST HILL BLVD
WEST PALM BEACH, FL 33406 US

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: ELLEN BROWN

09/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** 1VC () Delete
Name: TAPPEN, RUTH DR.
Address: 777 GLADES RD. BLDG.AZ79
City-St-Zip: BOCA RATON, FL 33431**Title:** 2VC () Delete
Name: MROZINSKI, PHILLIP
Address: 9260 SW 14TH STREET
City-St-Zip: BOCA RATON, FL 33428**Title:** C () Delete
Name: FERRERI, SAMUEL
Address: 5985 10TH AVE. N
City-St-Zip: GREENACRES, FL 33463**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CD (X) Change () Addition
Name: KALCK, KATHY
Address: 310 NW TREELINE TRACE
City-St-Zip: PORT ST LUCIE, FL 34986**Title:** VD (X) Change () Addition
Name: HANDLEY, JAN
Address: 4300 NE 25TH AVE
City-St-Zip: FT. LAUDERDALE, FL 33308**Title:** D (X) Change () Addition
Name: FERRERI, SAMUEL
Address: 6541 SPRING MEADOW
City-St-Zip: GREENACRES, FL 33413**Title:** TSD () Change (X) Addition
Name: PINEIRO, ENRIQUE
Address: 13180 SW 21ST STREET
City-St-Zip: MIAMI, FL 33175**Title:** D () Change (X) Addition
Name: KARP, JOSEPH
Address: 2875 PGA BLVD STE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410**Title:** D () Change (X) Addition
Name: SADOWSKY, CARL DR
Address: 4631 N CONGRESS AVE STE 200
City-St-Zip: WEST PALM BEACH, FL 33407

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: ELLEN BROWN

CEO

09/24/2008

Electronic Signature of Signing Officer or Director

Date