

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756490

FILED  
Sep 25, 2009  
Secretary of State

Entity Name: FEEDING SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

5850 N.W. 32ND AVENUE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

5850 N.W. 32ND AVENUE  
MIAMI, FL 33142

**New Mailing Address:**

FEI Number: 59-2097520      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:**

GATTI, JUDITH  
5850 NW 32ND AVE  
MIAMI, FL 33142 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: VP ( ) Delete  
Name: ADAIR, MICHAEL  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: P ( ) Delete  
Name: HANTMAN, SUSAN  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: VP ( ) Delete  
Name: COHEN, SCOTT  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: VP ( ) Delete  
Name: MILLARES, MARIA  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: ED (X) Delete  
Name: GATTI, JUDITH  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: BEHAR, JENNIFER  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: P (X) Change ( ) Addition  
Name: BERMAN, BRUCE  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: VP (X) Change ( ) Addition  
Name: MILLARES, MARIA  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: ED (X) Change ( ) Addition  
Name: GATTI, JUDITH  
Address: 5850 N.W. 32ND AVENUE  
City-St-Zip: MIAMI, FL 33142

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: YURI ALEJALDRE

Electronic Signature of Signing Officer or Director

DF

09/25/2009

\_\_\_\_\_ Date