

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757997

FILED
Mar 30, 2009
Secretary of State

Entity Name: THE STRANAHAN HOUSE, INC.

Current Principal Place of Business:

335 SE 6 AVENUE
FT. LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

335 SE 6 AVENUE
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 59-2164225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEITH, BARBARA W
335 SE 6 AVE
FORT LAUDERDALE, FL 33301 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: PP () Delete
Name: BLACKWELL, ELICIA
Address: 150 W FLAGLER
City-St-Zip: MIAMI, FL 33130 US

Title: P () Delete
Name: TATUM, THOMAS
Address: 200 E. LAS OLAS BLVD. 19TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP () Delete
Name: SMITH, DOUG
Address: EDSA, 1512 E BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S () Delete
Name: VON SALZEN, ERIC
Address: 2112 NE 44TH ST
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: T () Delete
Name: ABEL, JOHN
Address: ATLANTIC LITHO, 1451 NE 13 AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: VOGEL, DEBRA
Address: SUNTRUST BANK, 515 E LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ERIC VON SALZEN

S

03/30/2009

Electronic Signature of Signing Officer or Director

Date