


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2008 8:00 am
Secretary of State

02-15-2008 90005 018 ****61.25

DOCUMENT # N00000000953

1. Entity Name
COLLABORATIVE FAMILY LAW INSTITUTE, INC.



Principal Place of Business
**8525 SW 92 STREET STE B-5
 MIAMI, FL 33156**

Mailing Address
**8525 SW 92 STREET STE B-5
 MIAMI, FL 33156**

40025000



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02122008 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
NOT APPLICABLE

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HODOR, ESQ., JUDITH
8525 S.W. 92ND STREET
SUITE B-5
MIAMI, FL 33156

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee Is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLUMBERG, MARILYN ESQ. 100 S.E. 2 STREET, STE. 2700 MIAMI, FL 33131 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DULBERG, ROBERT ESQ. 9100 S. DADELAND BLVD., STE. 400 MIAMI, FL 33156 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOX, SPENCER ESQ. 201 S. BISCAYNE BLVD., SUITE 850 MIAMI, FL 331314332 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSSBARD, STEVEN ESQ 44 W. FLAGLER STREET, SUITE 2100 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HODOR, JUDITH ESQ. 8525 S.W. 92 STREET, STE. B-5 MIAMI, FL 33156 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROTH, ROSEMARIE S ESQ 8525 SW 92ND ST B-5 MIAMI, FL 33156 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

SEE ATTACHED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Judith Hodor **Judith Hodor, Dir.** **2/12/08** **305-279-4044**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 40025659

#N000000000953

**COLLABORATIVE FAMILY LAWYERS
INSTITUTE, INC.**

8525 S.W. 92ND STREET
SUITE B-5
MIAMI, FLORIDA 33156

TELEPHONE: 305-279-4044

FAX: 305-596-1198

February 12, 2008

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT
ADDITIONAL Officers/Directors of Collaborative Family Law Institute, Inc.

D
QUIAT, BETTE ELLEN, ESQ.
8525 S.W. 92nd Street, Suite B-5
Miami, Florida 33156

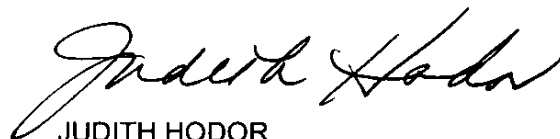
D
ROSEN, MARSHA C., ESQ.
701 Brickell Avenue, Suite 3260
Miami, Florida 33131-4944

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RUBIN, MELVIN, ESQ.
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STERN, LANA M., PH.D., P.A.
1450 Madruga Avenue, Suite 310
Coral Gables, Florida 33146

D
SHECHTER, PHILIP, C.P.A.
2525 Ponce de Leon Blvd., Fifth Floor
Coral Gables, Florida 33134



JUDITH HODOR
Treasurer/Director
Collaborative Family Lawyers Institute, Inc.