

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005648

FILED  
Mar 16, 2006  
Secretary of State

Entity Name: NON-VIOLENCE PROJECT SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

1205 SUNSET DRIVE  
2ND FLOOR  
CORAL GABLES, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

1234 SOUTH DIXIE HWY  
#348  
CORAL GABLES, FL 33146 US

**New Mailing Address:**

FEI Number: 13-3812224      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LANDSBERG, DIANE  
1205 SUNSET DRIVE  
2ND FLOOR  
CORAL GABLES, FL 33143 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: DP ( ) Delete  
Name: CASADEMONT, VINCE MR  
Address: ONE SE 3RD AVE, 1ST FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: DT ( ) Delete  
Name: LLODRA, ALEBRT MR  
Address: 7621 SW 59TH AVENUE  
City-St-Zip: MIAMI, FL 33143

Title: DS ( ) Delete  
Name: STONE, MJ MRS  
Address: 1016 TRAILMORE LANE  
City-St-Zip: WESTON, FL 33326

Title: DD ( ) Delete  
Name: LINDSAY, JOHN MR  
Address: 343 SEGORIA ST  
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PRES (X) Change ( ) Addition  
Name: STONE, MJ MS  
Address: 1016 TRAILMORE LANE  
City-St-Zip: WESTON, FL 33326

Title: VP (X) Change ( ) Addition  
Name: CASADEMONT, VINCE MR  
Address: 12000 BISCAYNE BOULEVARD  
City-St-Zip: MIAMI, FL 33181

Title: TR (X) Change ( ) Addition  
Name: LLODRA, ALBERT MR  
Address: 8501 SW 53RD AVENUE  
City-St-Zip: MIAMI, FL 33143

Title: SEC (X) Change ( ) Addition  
Name: CHO, TONY MR  
Address: 120 NE 127TH STREET  
City-St-Zip: MIAMI, FL 33137

Title: CH ( ) Change (X) Addition  
Name: NOBEL, MICHAEL PH.D  
Address: NOBEL FAMILY SOCIETY  
City-St-Zip: STOCKHOLM, SW

I hereby certify that the information supplied with this filing does not qualify for the 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: SHAMIRA THOMAS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

FPSC

03/16/2006

\_\_\_\_\_  
Date