

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009663

FILED
Apr 25, 2011
Secretary of State

Entity Name: THE FAMILY CORNERS, INC.

Current Principal Place of Business:

12490 NE 7 AVE
SUITE 216
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

12490 NE 7 AVE
SUITE 216
MIAMI, FL 33161

New Mailing Address:

FEI Number: 20-3496876 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STERIL, MARIE E
1005 NW 128TH ST.
N. MIAMI, FL 33168 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: C
Name: LAMARTINE, MICHEL P
Address: 8090 NW 21 ST.
City-St-Zip: SUNRISE, FL 33322

Title: C
Name: GERVAIS, EDDY
Address: 12490 N E 7 AVE
City-St-Zip: MIAMI, FL 33168

Title: T
Name: JULIEN, JOHN
Address: P.O. BOX 601171
City-St-Zip: N. MIAMI BEACH, FL 33160

Title: S
Name: DARGENSON, SIMONE
Address: 1301 NE 200 TERRACE
City-St-Zip: MIAMI, FL 33179

Title: O
Name: FLEURENA, BERMAN
Address: 1935 NE 172 ST.
City-St-Zip: MIAMI, FL 33162

Title: O
Name: WENSE, CONELIA
Address: 633 NW 167 ST, SUITE 522
City-St-Zip: MIAMI, FL 33162

I hereby 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 all other like empowered.

SIGNATURE: MARIE ERLANDE STERIL

MRS

04/25/2011

Electronic Signature of Signing Officer or Director

Date