

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012176

FILED
Jan 08, 2009
Secretary of State

Entity Name: RESEARCH AND REFORM FOR CHILDREN IN COURT, INC.

Current Principal Place of Business:

2990 SW 35 AVENUE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2990 SW 35 AVENUE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 26-1613076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIETZ, MATTHEW ESQ.
2990 SW 35 AVENUE
MIAMI, FL 33133 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: P () Delete
Name: LANGER, SHARON L
Address: 446 MAJORCA AVENUE
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP () Delete
Name: BLECKE, BERTE
Address: 8750 PONCE DE LEON ROAD
City-St-Zip: MIAMI, FL 33133

Title: S () Delete
Name: GOMEZ-KEIFER, MARIELLE DR.
Address: 3610 DURANGO STREET
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: DOBULAR, DALE
Address: 3300 NW 27 AVENUE
City-St-Zip: MIAMI, FL 33126

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:

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: SHARON LANGER

Electronic Signature of Signing Officer or Director

CHAI

01/08/2009

Date