## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29607

Apr 26, 2005 Secretary of State

Entity Name: HEALTHY MOTHERS/HEALTHY BABIES COALITION OF BROWARD COUNTY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

C/O FIRST UNION BANK C/O WACHOVIA

1100 W SR 84, 2ND FLOOR 1100 W SR 84, 2ND FLOOR

FORT LAUDERDALE, FL 33315 US FORT LAUDERDALE, FL 33315 US

**Current Mailing Address:** New Mailing Address:

P.O. BOX 350446

FORT LAUDERDALE, FL 33315 US

FEI Number: 65-0161493 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MODRECK, GEORGIA ED 7744 PETERS ROAD #237 PLANTATION, FL 33324 US

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

VPD () Delete VALLADERES, ELLEN VALLADERES, ELLEN Name: Name: 774 VERONA LAKE DRIVE Address: 774 VERONA LAKE DRIVE Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: PD () Delete Title: (X) Change ( ) Addition LAMPLOUGH, KIM Name: GLASSER, DEBBIE PH.D. Name:

Address: 5101 N.W. 21 AVE., #440 Address: 3301 COLLEGE AVENUE City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33314

Title: () Delete Title: SD (X) Change ( ) Addition EDWARDS, ETHEL DESIR-JEAN, STEPHANIE Name: Name: Address: 2421 S.W. 6 AVE. Address: 2701 W. OAKLAND PARK BLVD. City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip: FORT LAUDERDALE, FL 33311

Title: DP ( ) Delete Title: () Change () Addition

MODRECK, GEORGIA Name: Name: Address: 1100 W. SR 84 Address: City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

DUBOFF, REEVE Name: Name: WEISSBERG, MIKE

733 BREAKERS AVE 600 SE 3RD AVENUE, 7TH FLOOR Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GEORGIA MODRECK DP 04/26/2005