

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29765

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** SOPHIA BUTLER'S GROUP HOME, INC.

**Current Principal Place of Business:**

C/O SOPHIA BUTLER  
3951 NW 187 TERRACE  
MIAMI, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SOPHIA BUTLER  
PO BOX 55-2090  
MIAMI, FL 33055

**New Mailing Address:**

**FEI Number:** 65-0088091      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BUTLER, SOPHIA  
3951 NW 187 TERRACE  
MIAMI, FL 33055 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: PD  
Name: BUTLER, SOPHIA  
Address: 3951 NW 187TH TERRACE  
City-St-Zip: MIAMI, FL

Title: SD  
Name: POINTER, KELVIN  
Address: 3402 NW 182 ST  
City-St-Zip: MIAMI, FL

Title: TD  
Name: MACK, TORRENCE  
Address: 9820 NW 7 AVENUE  
City-St-Zip: MIAMI, FL 33150

Title: VD  
Name: HARRIS, CARRIE  
Address: 2445 NW 167TH STREET  
City-St-Zip: MIAMI, FL

Title: D  
Name: DICKSON, ANNIE  
Address: 3951 NW 187 TERRACE  
City-St-Zip: MIAMI, FL 33055

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: SOPHIA BUTLER

PD

02/17/2010

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

\_\_\_\_\_  
Date