## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47804

FILED Mar 09, 2008 Secretary of State

Entity Name: NORTH ANDREWS NEIGHBORHOOD ASSOCIATION INC.

**Current Principal Place of Business: New Principal Place of Business:** 169 NORTHWEST 44TH STREET SUITE 6 FT. LAUDERDALE, FL 33309 **New Mailing Address: Current Mailing Address:** 169 NORTHWEST 44TH STREET SUITE 6 FT. LAUDERDALE, FL 33309 FEI Number: 65-0330925 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FILKINS, ERIC CPA 440 S FÉDERAL HWY STE 204 DEERFIELD BEACH, FL 33441 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete BRUCE, SEAN ANTHONY, NIEDWIECKI Name: Name: 680 NE 59 CT Address: 5280 NE 1 TERRACE Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334 Title: Title: (X) Change ( ) Addition ( ) Delete ORR, KENDRA Name: WAYMON, HUDSON Name: Address: 241 NE 51 STREET Address: 5280 NE 1 TERRACE City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334 Title: () Delete Title: () Change () Addition DEFELICE, LINDA Name: Name: Address: 4509 NW 5TH AVE. Address: City-St-Zip: FT LAUDERDALE, FL 33309 City-St-Zip: Title: () Delete Title: () Change () Addition ADORNATO, III, JOHN Name: Name: Address: 5316 NE 5TH AVENUE Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MARINARO, ROSS MARTIN, KEN Name: Name: **5408 NE 1ST TERR** 5524 NE 3RD AVENUE Address: Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334 Title: () Delete Title: () Change () Addition MARTIN, LINDA Name: Name: Address: 5524 NE 3RD AVENUE Address: OAKLAND PARK, FL 33334 City-St-Zip: 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: JOHN ADORNATO III T 03/09/2008