2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Oct 24, 2006 Secretary of State DOCUMENT# N51436

Entity Name: FLORIDA INITIATIVE FOR SUICIDE PREVENTION, INC.-FLORIDA DIVISION

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

2645 EXECUTIVE PARK DRIVE WESTON, FL 33331

Current Mailing Address: New Mailing Address:

2645 EXECUTIVE PARK DRIVE WESTON, FL 33331

FEI Number: 65-0370064 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:

ROSEN, HARRY M PRES. 1253 MÁNOR DRIVE S WESTON, FL 33326

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 BARNETT, RICHARD A ESQ. HOLCOMB, DAWN Name: Name: P.O.BOX 223248 Address: 921 SW 111TH WAY Address: City-St-Zip: HOLLYWOOD, FL 33022 City-St-Zip: DAVIE, FL 33324 US

Title: () Delete Title: **EDIR** (X) Change () Addition ROSEN, JACKIE H Name: ROSEN, JACKIE H Name: Address: 1253 MANOR DRIVE S Address: 1253 MANOR DRIVE S City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: TRES () Delete Title: (X) Change () Addition MC CORMICK, BILL STEINMAN, JOSEPH Name: Name:

2645 EXECUTIVE PARK DRIVE 879 SAVANNAH FALLS DRIVE Address: Address:

City-St-Zip: WESTON, FL 33331 City-St-Zip: WESTON, FL 33327

(X) Change () Addition Title: **PRES** () Delete Title: **PRES** Name: ROSEN, HARRY M ESQ. Name: ROSEN, HARRY M ESQ. 200 EAST BROWARD BLVD. 2500 WESTON RD, STE 220 Address: Address: City-St-Zip: WESTON, FL 33331 City-St-Zip: FT. LAUDERDALE, FL 33302

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

ROBAINA, JUDI ROBAINA, JUDI Name: Name: 16526 RUBY LAKE 16526 RUBY LAKE Address: Address: City-St-Zip: WESTON, FL 33331 City-St-Zip: WESTON, FL 33331

Title: () Delete Title: (X) Change () Addition SIMON, ARLENE J ESQ. WEIL HELEN Name: Name:

Address: 6051 N. OCEAN DR. #505 Address: 16795 PATIO VILLAGE LANE HOLLYWOOD, FL 33019 City-St-Zip: **DAVIE, FL 33326** City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HARRY M. ROSEN **PRES** 10/24/2006

Electronic Signature of Signing Officer or Director

Date