

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007
Secretary of State

DOCUMENT# N94000002871

Entity Name: GLSEN SOUTH FLORIDA, INC.

Current Principal Place of Business:

3229 GIFFORD LANE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 480299
FT. LAUDERDALE, FL 33348

New Mailing Address:

P.O. BOX 24444
FT. LAUDERDALE, FL 33307

FEI Number: 65-0476504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BREMER, JOHN
1905 N OCEAN BLVE
UNIT E16B
FORT LAUDERDALE, FL 33306 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: CD () Delete
Name: LOUPO, ROBERT
Address: 3229 GIFFORD LANE
City-St-Zip: MIAMI, FL 33133

Title: P () Delete
Name: PRESLEY, BRUCE
Address: 2609 NE 8 STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: PORTER, JOE
Address: 255 EVERRIA ST UNIT 1412
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: KAPLAN, BETSY
Address: 6750 SW 122 DR
City-St-Zip: MIAMI, FL 33156

Title: ST () Delete
Name: BREMER, JOHN
Address: 1905 N OCEAN BLVD
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: D () Delete
Name: CARTER, ELLIOTT
Address: 255 EVERRIA ST UNIT 1412
City-St-Zip: WEST PALM BEACH, FL 33401

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
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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 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 BREMER

ST

01/25/2007

Electronic Signature of Signing Officer or Director

_____ Date