

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000009949

FILED  
Apr 21, 2006  
Secretary of State

Entity Name: FLORIDA FAMILY MEDIATION INC.

**Current Principal Place of Business:**

100 E. LINTON BLVD.  
STE. 146 A  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

100 E. LINTON BLVD.  
SUITE 146A  
DELRAY BEACH, FL 33483

**New Mailing Address:**

FEI Number: 65-0724237      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MULLIN, JIM  
2080 NW BOCA RATON BLVD  
BOCA RATON, FL 33431 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTF ( ) Delete  
Name: WEISS, SHEILA K  
Address: 5121 OAK HILL LANE 425  
City-St-Zip: DELRAY BEACH, FL 33484

Title: ST ( ) Delete  
Name: WEISS, SHEILA K  
Address: 5121 OAK HILL LANE #425  
City-St-Zip: DELRAY BEACH, FL 33484

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHEILA K. WEISS

PST

04/21/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date