

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006332

FILED  
Jul 28, 2010  
Secretary of State

**Entity Name:** HOME AWAY FROM HOME SENIOR CENTER, INC.

**Current Principal Place of Business:**

9811 GLACIER DRIVE  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

9811 GLACIER DRIVE  
MIRAMAR, FL 33025

**New Mailing Address:**

**FEI Number:** 20-1207900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRIFFIN, IRENE  
9811 GLACIER DRIVE  
MIRAMAR, FL 33025 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: GRIFFIN, IRENE K  
Address: 9811 GLACIER DRIVE  
City-St-Zip: MIRAMAR, FL 33025

Title: O  
Name: HILL, PHYLLIS  
Address: 11561 SW 9TH CT.  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D  
Name: GRIFFIN, EBONY  
Address: 6919 W. BROWARD BLVD. STE. 257  
City-St-Zip: PLANTATION, FL 33317

Title: O  
Name: VEASY, DANIEL  
Address: 4709 NW 9TH. DRIVE  
City-St-Zip: PLANTATION, FL 33317

Title: O  
Name: BRUNACHE, SPARKLE  
Address: 1442 NW 34TH WAY  
City-St-Zip: LAUDERHILL, FL 33311

Title: O  
Name: BROWN, NEDRA  
Address: 4241 SW 27TH STREET  
City-St-Zip: HOLLYWOOD, FL 33023

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: IRENE GRIFFIN

PD

07/28/2010

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

\_\_\_\_\_  
Date