2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007176

Entity Name: COLLABORATIVE FAMILY LAW PROFESSIONALS OF SOUTH

FLORIDA, INC.

Current Principal Place of Business:

1040 BAYVIEW DRIVE

SUITE 605

FORT LAUDERDALE, FL 33304

Current Mailing Address:

1040 BAYVIEW DRIVE SUITE 605

FORT LAUDERDALE, FL 33304 US

FEI Number: 65-1154241 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERZNER, STEVEN ESQ 1040 BAYVIEW DR. #605

FORT LAUDERDALE, FL 33304 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

City-State-Zip:

Officer/Director Detail:

Title DIRECTOR Title PRESIDENT, DIRECTOR Name BASS, IRIS M ESQ. Name BERZNER, STEVEN ESQ. Address 8181 W. BROWARD BLVD #201 Address 1040 BAYVIEW DR., STE. 605 City-State-Zip: PLANTATION FL 33324 City-State-Zip: FT. LAUDERDALE FL 33304

Title VP, DIRECTOR Title S/D

Name NANCY, BRODZKI ESQ. Name ANN-MARIE, GIUSTIBELLI ESQ. Address 2855 UNIVERSITY DR Address 8551 W SUNRISE BLVD. # 301

SUITE 520

City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR

Name ROBIN. SHAW ESQ.

Address 413 S.E. 18 STREET
Address 7777 GLADES RD. #400

City-State-Zip: FORT LAUDERDALE FL 33316

Title DIRECTOR

TitleTREASURER, DIRECTORNameSHERMAN, KIM D ESQ.NameRHODA, SOKOLOFF ESQ.Address1000 CORPORATE DR

Address 600 SW 4 AVE SUITE 310

City-State-Zip: FORT LAUDERDALE FL 33315 City-State-Zip: FORT LAUDERDALE FL 33334

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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: STEVEN L. BERZNER

PRESIDENT

PLANTATION FL 33322

01/29/2013

FILED Jan 29, 2013

Secretary of State

CC4122854947

Officer/Director Detail Continued:

DIRECTOR Title Title

Name SPANO, MICHAEL F ESQ. Name MINICUCCI, ELENA R ESQ

Address 7935 WEST DRIVE Address

SUITE 6

NORTH BAY VILLAGE FL 33141 City-State-Zip:

DIRECTOR Title

HELLER, RANDY PHD Name

Address 3325 S. UNIVERSITY DR

SUITE 102

DAVIE FL 33328 City-State-Zip:

Title DIRECTOR

CORRAL, LUANA M Name

Address 2699 STIRLING RD

SUITE A200

City-State-Zip: FORT LAUDERDALE FL 33312

DIRECTOR

P.O. BOX 268091

City-State-Zip: WESTON FL 33326

Title DIRECTOR

Name RODRIGUEZ, BERNADENE A ESQ.

111 N PINE ISLAND RD Address

SUITE 105

City-State-Zip: PLANTATION FL 33324

Title **DIRECTOR**

MAZZA, CAROLANN ESQ. Name

Address 1040 BAYVIEW DR

SUITE 605

City-State-Zip: FORT LAUDERDALE FL 33304