

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51340

**Entity Name:** NEIGHBORS 4 NEIGHBORS, INC.**Current Principal Place of Business:**C/O WFOR TV  
8900 N.W. 18TH TERRACE  
MIAMI, FL 33172**Current Mailing Address:**C/O WFOR TV  
8900 N.W. 18TH TERRACE  
MIAMI, FL 33172 US**FEI Number:** 65-0364391**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAMERON, LYNNE ED  
8900 N.W. 18TH TERRACE  
MIAMI, FL 33172 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**Officer/Director Detail :**

Title	PRESIDENT
Name	MICHAEL, GOODMAN
Address	4100 NE 15 TERRACE
City-State-Zip:	FT LAUDERDALE FL 33334

Title	VP
Name	BOOK, RONALD
Address	18851 NE 29 AVENUE
City-State-Zip:	AVENTURA FL 33180

Title	DIRECTOR
Name	GONZALEZ, AMANDA
Address	8750 SW 144 STREET
City-State-Zip:	PALMETTO BAY FL 33176

Title	DIRECTOR
Name	LEVY, ADAM
Address	8900 NW 18 TERRACE
City-State-Zip:	DORAL FL 33172

Title	SECRETARY
Name	LAZEGA, RUSSEL
Address	3467 NE 168 STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33160

Title	TREASURER
Name	DORSAINVIL, DOMINIQUE
Address	14420 SW 143 CT
City-State-Zip:	MIAMI FL 33186

*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: MICHAEL GOODMAN****PRESIDENT****02/09/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date