

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51436

Entity Name: FLORIDA INITIATIVE FOR SUICIDE PREVENTION, INC.**Current Principal Place of Business:**2645 EXECUTIVE PARK DRIVE
WESTON, FL 33331**Current Mailing Address:**2645 EXECUTIVE PARK DRIVE
WESTON, FL 33331 US**FEI Number:** 65-0370064**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSEN, HARRY M. ESQ.
2645 EXECUTIVE PARK DRIVE
WESTON, FL 33331 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:** HARRY M. ROSEN

01/09/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name ROSEN, JACKIE H.
Address 2645 EXECUTIVE PARK DRIVE
City-State-Zip: WESTON FL 33331

Title VP
Name STEINMAN, JOSEPH
Address 879 SAVANNAH FALLS DRIVE
City-State-Zip: WESTON FL 33327

Title DIRECTOR
Name ALLACA, ANTHONY .
Address 2137 HABOUR WAY
City-State-Zip: WESTON FL 33326

Title DIRECTOR
Name ZELEDON, JOAQUIN
Address 12351 NW 6TH STREET
City-State-Zip: PLANTATION FL 33325

Title DIRECTOR
Name SIMUNEK, LINDA ESQ.
Address 1750 NE 167TH STREET
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title PRES
Name ROSEN, HARRY M. ESQ.
Address 2843 EXECUTIVE PARK DRIVE
City-State-Zip: WESTON FL 33331

Title DIR.
Name MASTERS, DUBBIE
Address 23 CHESTNUT CIRCLE
City-State-Zip: COOPER CITY FL 33026

Title DIRECTOR
Name BROOK, SCOTT J.
Address 2855 N. UNIVERSITY DRIVE
510
City-State-Zip: CORAL SPRINGS FL 33065

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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: JACKIE ROSENEXECUTIVE
DIRECTOR/CEO

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SCHWARTZ, CAROLE
Address	9213 NW 9TH PLACE
City-State-Zip:	PLANTATION FL 33324