

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702987

FILED
Apr 06, 2009
Secretary of State

Entity Name: NORFOLK HOUSE INC.

Current Principal Place of Business:

2743 NE 15TH STREET
FT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

2743 NE 15TH STREET
FT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 59-1002906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASEY, MILLIE
2743 N.E. 15TH STREET
APT. #8
FT. LAUDERDALE, FL 33304 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 () Delete
Name: STEFFINE-CASEY, KIM
Address: 1998 SE 17TH CT.
City-St-Zip: LAUDERDALE BY THE SEA, FL 33062

Title: TD () Delete
Name: CASEY, MILLIE
Address: 2743 N.E. 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: SD () Delete
Name: PRSONS, GERRY
Address: 2743 NE 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: ZIMMERMAN, PETER
Address: 2743 NE 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIM CASEY-STEFFINE

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date