2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT #703168

1. Entity Name

UNITARIAN FELLOWSHIP OF SOUTH FLORIDA, INC.



Principal Place of Business

1812 ROOSEVELT STREET HOLLYWOOD, FL 33020

Mailing Address

1812 ROOSEVELT STREET HOLLYWOOD, FL 33020

FILED Aug 08, 2008 08:00 AM Secretary of State



07252008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0096663

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CANNATELLA, BRENDA REV 3047 GARFIELD ST HOLLYWOOD, FL 33021

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HOLLYWOOD, FL 33021			IN THIS SPACE			
	tions of registered agent.	•			oth, in the State of Florida. I am familiar with, and accep	
Signature, typed or printed name of registered agent and title if applicable. Filling Fee is \$61.25 Due by September 12, 2008 Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered 9. Election Campaign Finan Trust Fund Contribution				\$5.00 May Be Added to Fees	DATE	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD SLOAN, JOHN REV 1530 PLUNKETT STREET HOLLYWOOD, FL 33020	CTORS			U00000957308 08/08/08-80003-012 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BERGER, MELISSA 3246 HAYES ST HOLLYWOOD, FL 33021					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FISHER, DEBE REV 301 - 174 STREET APT 502 MIAMI, FL 33160			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CANNATELLA, BRENDA REV. 3047 GARFIELD ST HOLLYWOOD, FL 33021					
TITLE NAME STREET ADDRESS	D DAME, RUSSELL 8440 PASADENA BLVD	•				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes if further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PEMBROKE PINES, FL 33024

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Brendo Canatella
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-31-08

754-963-3663

Date