

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90441 028 ****70.00

DOCUMENT # 729143 1. Entity Name COMMUNITY BLOOD CENTERS OF SOUTH FLORIDA, INC.					
Principal Place of Business 1700 N. STATE ROAD 7 LAUDERHILL, FL 33313				Mailing Address 1700 N. STATE ROAD 7 LAUDERHILL, FL 33313	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		04242007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 23-7376740	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROUAULT, CHARLES L. 1700 N. STATE ROAD 7 LAUDERHILL, FL 33313				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALEK, PAUL MD 1700 N. STATE ROAD 7 FORT LAUDERDALE, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIEBERMAN, ILENE 1700 NORTH STATE RD 7 LAUDERHILL, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD FISCHLER, ABRAHAM 1700 N. STATE ROAD 7 FORT LAUDERDALE, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROUAULT, CHARLES L MD 1700 N. STATE RD. 7 LAUDERHILL, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLEY, E. BIRCH 1700 N. STATE ROAD 7 FORT LAUDERDALE, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENTON, EDWARD T. 2800 NE 37 ST. FT. LAUDERDALE, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: CHARLES L. ROUAULT MD 4/24/2007 9547359600					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT

40090697

#729143

Director/Chair
Richard Beaver
1700 North State Road 7
Lauderhill, FL 33313

Director
Ralph A. Aleman
1700 North State Road 7
Lauderhill, FL 33313

Director/Vice Chair
Bud Scholl
1700 North State Road 7
Lauderhill, FL 33313

Director
Kenneth Jackson
1700 North State Road 7
Lauderhill, FL 33313

Director/Secretary/Treasurer
John Benz
1700 North State Road 7
Lauderhill, FL 33313

Director
David Sonkin
1700 North State Road 7
Lauderhill, FL 33313

Director
Willis Murray
1700 North State Road 7
Lauderhill, FL 33313

Director
Edwin Harvey Hamilton
1700 North State Road 7
Lauderhill, FL 33313

Director
Ben Williams
1700 North State Road 7
Lauderhill, FL 33313

Director
Miguel A. Brito Jr., M.D.
1700 North State Road 7
Lauderhill, FL 33313

Director
Michael De Lucca
1700 North State Road 7
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Director
Edward Rosasco
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Director
Armando J. Guerra
1700 North State Road 7
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Director
Peter Johnson
1700 North State Road 7
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Director
Linda S. Quick
1700 North State Road 7
Lauderhill, FL 33313

Director
Joy Young-Ramsaran
1700 North State Road 7
Lauderhill, FL 33313

Director
Joe Pena
1700 North State Road 7
Lauderhill, FL 33313

Director
Steven M. Klein
1700 North State Road 7
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Director
Ilene Lieberman
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