


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90020 010 ****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
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DO NOT WRITE IN THIS SPACE

	
02042008 No Chg-NP	CR2E037 (4/06)
4. FEI Number 23-7376740	Applied For Not Applicable
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	DO NOT WRITE IN THIS SPACE
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.	

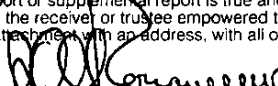
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALEK, PAUL MD 1700 N. STATE ROAD 7 FORT LAUDERDALE, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIEBERMAN, ILENE 1700 NORTH STATE RD 7 LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHLER, ABRAHAM 1700 N. STATE ROAD 7 FORT LAUDERDALE, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROUAULT, CHARLES L MD 1700 N. STATE RD. 7 LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLEY, E. BIRCH 1700 N. STATE ROAD 7 FORT LAUDERDALE, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENTON, EDWARD T. 2800 NE 37 ST. FT. LAUDERDALE, FL

DO NOT WRITE
IN THIS SPACE

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

ATTACHMENT

40042941

Director/Chair #729143
Richard Beaver
1700 North State Road 7
Lauderhill, FL 33313

Director
Michael De Lucca
1700 North State Road 7
Lauderhill, FL 33313

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

Director
Edward Rosasco
1700 North State Road 7
Lauderhill, FL 33313

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

Director
Armando J. Guerra
1700 North State Road 7
Lauderhill, FL 33313

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

Director
Peter Johnson
1700 North State Road 7
Lauderhill, FL 33313

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

Director
Linda S. Quick
1700 North State Road 7
Lauderhill, FL 33313

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

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

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

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

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

Director
Steven M. Klein
1700 North State Road 7
Lauderhill, FL 33313

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

Director
Ilene Lieberman
1700 North State Road 7
Lauderhill, FL 33313

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