## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#731159** 

FILED Apr 11, 2009 Secretary of State

Entity Name: PARENTS WITHOUT PARTNERS, GREATER HOLLYWOOD CHAPTER NO. 125, INC.

Current Principal Place of Business: New Principal Place of Business:

18871 NW 2ND STREET PEMBROKE PINES, FL 33029

Current Mailing Address: New Mailing Address:

18871 NW 2ND STREET PEMBROKE PINES, FL 33029

FEI Number: 23-7187602 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KRIDOS, MARIE 18871 NW 2ND STREET PEMBROKE PINES, FL 33029 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:

- Flateria Circulus I Davidoud Acad

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 FOSTER, DEBORAH
 Name:
 KRIDOS, MARIE

 Address:
 55 SW 40TH AVE
 Address:
 18871 NW 2ND ST.

City-St-Zip: FORT LAUDERDALE, FL 33314 City-St-Zip: PEMBROKE PINES, FL 33029

Title: D ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 KRIDOS, MARIE
 Name:
 MORGAN, KAY

 Address:
 18871 NW 2ND ST.
 Address:
 2001 SW 67TH LN

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 City-St-Zip:
 MIRAMAR, FL 33023

Title: D ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 LANDY, ROCHELLE
 Name:
 LANDY, ROCHELLE

 Address:
 7103 NW 78TH AVE
 Address:
 7103 NW 78TH AVE

 City-St-Zip:
 TAMARAC, FL 33321
 City-St-Zip:
 TAMARAC, FL 33321

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 KOZIOL, SYLVIA
 Name:

 Address:
 941 SW 20TH ST
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33315
 City-St-Zip:

 Name:
 CLAYBURN, CAROL
 Name:

 Address:
 10101 ACORN LN
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 330262447
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SERPA, CAROL
 Name:

 Address:
 14820 ARCHEZ HALL ST.
 Address:

 City-St-Zip:
 DAVIE, FL 33331
 City-St-Zip:

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: KAY MORGAN S 04/11/2009