

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741497

FILED
Jan 05, 2007
Secretary of State

Entity Name: FAMILY RESOURCE CENTER OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

155 SOUTH MIAMI AVENUE
500
MIAMI, FL 33130 US

New Principal Place of Business:

Current Mailing Address:

155 SOUTH MIAMI AVENUE
500
MIAMI, FL 33130 US

New Mailing Address:

FEI Number: 59-1788265 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WUNDERMAN, OREN PHD
155 SOUTH MIAMI AVE
STE 500
MIAMI, FL 33130 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: CD () Delete
Name: MCKENNA, ERIC
Address: 1201 BRICKELL AVE #440
City-St-Zip: MIAMI, FL 33131

Title: TD () Delete
Name: GREEN BERG, JACQUELINE CPA
Address: 3035 NORTH BAY ROAD
City-St-Zip: MIAMI, FL 33140

Title: ED () Delete
Name: WUNDERMAN, OREN PHD
Address: 155 S. MIAMI AVE. #500
City-St-Zip: MIAMI, FL 33130

Title: D () Delete
Name: KELLER, JOHN
Address: 3250 MARY STREET STE 405
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: KELLER, JOHN ESQ
Address: 3250 MARY STREET SUITE 405
City-St-Zip: MIAMI, FL 33133

Title: TD (X) Change () Addition
Name: KAPLAN, ANDREW CPA
Address: 613 LAYNE BLVD
City-St-Zip: HALLANDALE BEACH, FL 33009

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

Title: VC (X) Change () Addition
Name: LIEBMAN, SHARON ESQ
Address: 150 W. FLAGLER STREET #1910
City-St-Zip: MIAMI, FL 33130

I hereby certify that the information supplied with this filing does not qualify for the 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: OREN WUNDERMAN, PHD

ED

01/05/2007

Electronic Signature of Signing Officer or Director

Date