

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757094

FILED
Apr 15, 2008
Secretary of State

Entity Name: PARTNERS IN ACTION, INC.

Current Principal Place of Business:

1350 E. SUNRISE BLVD
SUITE 106
FT. LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

1350 E. SUNRISE BLVD
SUITE 106
FT. LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 59-2090310 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SOLOMON, LEONARD
1016 SE 4TH STREET
FT. LAUDERDALE, FL 33301 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: PD () Delete
Name: SOLOMON, LEONARD A
Address: 1016 SE 4TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD (X) Delete
Name: DAW, WILLIAM
Address: 980 SW 19TH STREET
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: STARR, JOAN
Address: 5726 FOX HOLLOW DRIVE
City-St-Zip: BOCA RATON, FL 33486

Title: MD () Delete
Name: LAGERQUIST, EMILY NELL
Address: 1350 E SUNRISE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: VOS, JAAP PHD
Address: FAU, FORT LAUDERDALE CAMPUS
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: D () Delete
Name: BLUME, MARGARET
Address: 1350 EAST SUNRISE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: LEONARD SOLOMON

PR

04/15/2008

Electronic Signature of Signing Officer or Director

Date