

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766270

FILED
Feb 02, 2006
Secretary of State

Entity Name: THE INFORMED FAMILIES/THE FLORIDA FAMILY PARTNERSHIP, INC.

Current Principal Place of Business:

2490 CORAL WAY
MIAMI, FL 331453449

New Principal Place of Business:

Current Mailing Address:

2490 CORAL WAY
MIAMI, FL 331453449

New Mailing Address:

FEI Number: 59-2231894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SAPP, PEGGY B
2490 CORAL WAY
MIAMI, FL 331453449 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: VC () Delete
Name: SINGER, STEVEN DR.
Address: 8400 NW 33RD ST., SUITE 100
City-St-Zip: MIAMI, FL 33122

Title: PD () Delete
Name: SAPP, PEGGY B
Address: 7201 SW 47TH CT
City-St-Zip: MIAMI, FL 33145

Title: T () Delete
Name: FARRA, MIGUEL
Address: 1001 BRICKELL BAY DR, 9TH FL
City-St-Zip: MIAMI, FL 33131

Title: S () Delete
Name: FALCO, JOSEPH
Address: 200 SOUTH PARK RD, SUITE 200
City-St-Zip: FORT LAUDERDALE, FL 33172

Title: D () Delete
Name: KORGE, DEBORAH
Address: 6121 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33146

Title: C () Delete
Name: RUSSELL, MARY S
Address: 6130 SUNSET DR
City-St-Zip: MIAMI, FL 33143 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VC (X) Change () Addition
Name: GOLDSMITH, BERTRAM
Address: 13055 NEVADA ST
City-St-Zip: CORAL GABLES, FL 33156

Title: PD (X) Change () Addition
Name: SAPP, PEGGY B
Address: 7201 SW 47TH CT
City-St-Zip: MIAMI, FL 33145

Title: T (X) Change () Addition
Name: KIRK, WILLIAM
Address: 717 SE 6 CT
City-St-Zip: FT LAUDERDALE, FL 33301

Title: S (X) Change () Addition
Name: FALCO, JOSEPH
Address: 5915 SW 79 ST
City-St-Zip: MIAMI, FL 33143

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 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: PEGGY B. SAPP

P

02/02/2006

Electronic Signature of Signing Officer or Director

Date