

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002110

FILED  
May 16, 2006  
Secretary of State

**Entity Name:** LITTLE BROTHERS - FRIENDS OF THE ELDERLY, INC.

**Current Principal Place of Business:**

16590 S DIXIE HIGHWAY  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

16590 S DIXIE HIGHWAY  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 36-3315721      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GUERRERO, ALEJANDRO  
16590 S. DIXIE HIGHWAY  
MIAMI, FL 33157      US

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

DREW, ELISA T  
16590 S DIXIE HIGHWAY  
MIAMI, FL 33157      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: ELISA T. DREW

05/16/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: HOARD, LORETTA  
Address: 309 BELLEVUE AVE.  
City-St-Zip: DALY CITY, CA 94014

Title: V      ( ) Delete  
Name: KILAND, TAYLOR B  
Address: 4603 30TH ROAD SOUTH  
City-St-Zip: ARLINGTON, VA 22206

Title: S      ( ) Delete  
Name: BORZO, GREG  
Address: 5519 N. SPALDING  
City-St-Zip: CHICAGO, IL 60625

Title: T      ( ) Delete  
Name: BORZO, NANCY B  
Address: 50 MOUNOS BLVD  
City-St-Zip: ST PAUL, MN 55106

Title: D      (X) Delete  
Name: ELISA, DREW T  
Address: 954 W. WASHINGTON BLVD., 5TH FL  
City-St-Zip: CHICAGO, IL 60607

**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  
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: ELISA T. DREW

D

05/16/2006

Electronic Signature of Signing Officer or Director

Date