2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006105

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MIAMI, FL 33145

PAULINE, ROY

8020 SW 26TH ST.

MIAMI, FL 33155

() Delete

FILED Sep 04, 2007 Secretary of State

Entity Name: THE UNCONSERVATORY, INC. **Current Principal Place of Business: New Principal Place of Business:** 8035 SW 26TH ST. MIAMI, FL 33155 **Current Mailing Address: New Mailing Address:** 8035 SW 26TH ST. MIAMI, FL 33155 FEI Number: 68-0299977 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: Name and Address of New Registered Agent: WHIPPLE, KIRK 8035 SW 26TH ST. MIAMI, FL 33155 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WHIPPLE, KIRK Name: Name: Address: 8035 SW 26TH ST. Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: Title: AD () Delete Title: () Change () Addition Name: MORALES, MARILYN Name: Address: 8035 SW 26TH ST. Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: Title: () Delete Title: (X) Change () Addition HENRIQUEZ, UBALDO Name: HENRIQUEZ, UBALDO Name: 5220 N.W. 7TH ST., APT. A204 5220 N.W. 7TH ST., APT. A305 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126 () Delete Title: Title: () Change () Addition LEAL, BOBBIE Name: Name: 2325 SW 18TH ST. Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KIRK WHIPPLE ED 09/04/2007

() Change () Addition