## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000001290

Entity Name: PARAVEDA FOUNDATION, INC.

FILED Jaņ 15, 2<u>00</u>9 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2600 ONE COMMERCE SQUARE PHILADELPHIA, PA 19103

**Current Mailing Address: New Mailing Address:** 

2600 ONE COMMERCE SQUARE 2150 SANS SOUCI BOULEVARD PHILADELPHIA, PA 19103 APT PHE-1 NORTH MIAMI, FL 33181

FEI Number: 20-8984870 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

2150 SANS SOUCI BLVD, STE PH E1 NORTH MIAMI, FL 33181

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CPST () Delete (X) Change ( ) Addition

TAN. FRED TAN. FRED Name: Name:

Address: 2150 SANS SOUCI BLVD APT PH E1 Address: 2150 SANS SOUCI BLVD APT PH E1

NORTH MIAMI, FL 33181 City-St-Zip: NORTH MIAMI, FL 33181 City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete

Name: CARLSON, BRAD Name: CARLSON, BRAD

Address: 100 SOUTH POINTE DRIVE #3506 Address: 100 SOUTH POINTE DRIVE #3506

MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete Title: (X) Change ( ) Addition

ROSS, GUY Name: ROSS, GUY Name:

1617 WHITE STREET 1617 WHITE STREET Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

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: FREDERICK TAN MR. 01/15/2009