

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002518

FILED
Mar 31, 2009
Secretary of State

Entity Name: NEIGHBORS GIVING THANKS, INC.

Current Principal Place of Business:

12805 SW 84TH AVE RD
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

12805 SW 84TH AVE RD
MIAMI, FL 33156

New Mailing Address:

FEI Number: 31-1706319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TELISMAN, ALAN
12805 SW 84TH AVE. RD
MIAMI, FL 33156 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: TELISMAN, ALAN ESQ.
Address: 12805 SW 84TH AVE. RD
City-St-Zip: MIAMI, FL 33156

Title: VD () Delete
Name: GROSS, HOWARD ESQ.
Address: 12805 SW 84TH AVE. RD
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: SIMON, DAVID
Address: 8925 SW 148TH STREET, SUITE 218
City-St-Zip: MIAMI, FL 33176

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:

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: ALAN TELISMAN

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date