

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004072

FILED
Apr 23, 2006
Secretary of State

Entity Name: HAYNES-SHIPMAN FAMILY, INC.

Current Principal Place of Business:

3962 NW 167TH ST.
MIAMI, FL 33054

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 172706
HIALEAH, FL 33017

New Mailing Address:

FEI Number: 65-1020629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUNIE V. HORNE, P.A.
3962 NW 167TH ST.
MIAMI, FL 33054 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: WASHINGTON-BROWN, LINDA
Address: 2443 NW 179TH STREET
City-St-Zip: OPA LOCKA, FL 33056

Title: VD () Delete
Name: HOWELL, VERNON
Address: 1403 GLOVERDALE DRIVE
City-St-Zip: SAVANNAH, GA 31405

Title: SD () Delete
Name: WASHINGTON, BRIDGET
Address: 9588 SW 8TH ST
City-St-Zip: HOLLYWOOD, FL 33025

Title: TD () Delete
Name: DARDY, CONSTANCE
Address: 20880 NW 18 ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SD () Delete
Name: BAKER, BRENDA
Address: 1307 EAST 71ST STREET
City-St-Zip: SAVANNAH, GA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WASHINGTON-BROWN, LINDA
Address: 6283 N.W. 201 TERRACE
City-St-Zip: MIAMI, FL 33015

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: HAYNES, SHIRLEY
Address: P.O. BOX 503
City-St-Zip: BUFFALO, NY 14209

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: LINDA WASHINGTON-BROWN

PRES

04/23/2006

Electronic Signature of Signing Officer or Director

Date