

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004482

FILED  
Jan 19, 2005  
Secretary of State

Entity Name: MATRIX HEALTH FOUNDATION, INC.

## Current Principal Place of Business:

2700 GLADES CIR., #122  
WESTON, FL 33327

## New Principal Place of Business:

933 SHOTGUN ROAD  
SUNRISE, FL 33326

## Current Mailing Address:

2700 GLADES CIR., #122  
WESTON, FL 33327

## New Mailing Address:

933 SHOTGUN ROAD  
SUNRISE, FL 33326

FEI Number: 65-1023737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HURWITZ, STEPHEN A  
2700 GLADES CIR., #122  
WESTON, FL 33327 US

## Name and Address of New Registered Agent:

HURWITZ, STEPHEN A  
933 SHOTGUN ROAD  
SUNRISE, FL 33326 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:

01/19/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HURWITZ, STEPHEN A MR.  
Address: 2700 GLADES CIR., #122  
City-St-Zip: WESTON, FL 33327

Title: VPD ( ) Delete  
Name: KAUFMAN, STUART R  
Address: 2700 GLADES CIR., #122  
City-St-Zip: WESTON, FL 33327

Title: VPD ( ) Delete  
Name: WEINBRUN, GERALD  
Address: 2700 GLADES CIR., #122  
City-St-Zip: WESTON, FL 33327

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HURWITZ, STEPHEN A MR.  
Address: 933 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326

Title: VPD (X) Change ( ) Addition  
Name: KAUFMAN, STUART R  
Address: 933 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326

Title: VPD (X) Change ( ) Addition  
Name: WEINBRUN, GERALD  
Address: 933 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN A. HURWITZ

PR

01/19/2005

Electronic Signature of Signing Officer or Director

Date