2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005648

FILED Jan 07, 2005 Secretary of State

Entity Name: NON-VIOLENCE PROJECT SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

1205 SUNSET DRIVE 2ND FLOOR

CORAL GABLES, FL 33143 US

Current Mailing Address: New Mailing Address:

1234 SOUTH DIXIE HWY #348

CORAL GABLES, FL 33146 US

FEI Number: 13-3812224 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:

AVALOS, MARIO

1205 SUNSET DRIVE

1205 SUNSET DRIVE

2ND FLOOD

2ND FLOOR 2ND FLOOR

CORAL GABLES, FL 33143 US CORAL GABLES, FL 33143 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: DIANE LANDSBERG 01/07/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ACETIUNO, ROBERT MR
 Name:
 CASADEMONT, VINCE MR

 Address:
 ONE SE 3RD AVE, 1ST FLOOR
 Address:
 ONE SE 3RD AVE, 1ST FLOOR

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: DT () Delete Title: () Change () Addition

 Name:
 LLODRA, ALEBRT MR
 Name:

 Address:
 7621 SW 59TH AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:

Title: DS () Delete Title: () Change () Addition

 Name:
 STONE, MJ MRS
 Name:

 Address:
 1016 TRAILMORE LANE
 Address:

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:

Title: DD () Delete Title: () Change () Addition

 Name:
 LINDSAY, JOHN MR
 Name:

 Address:
 343 SEGORIA ST
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:

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: DIANE LANDSBERG DD 01/07/2005