

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008389

FILED
Jun 06, 2011
Secretary of State

Entity Name: FLORIDA REGIONAL INTERFAITH/INTERAGENCY EMERGENCY NETWORK IN DISASTERS, INC.

Current Principal Place of Business:

1651 W 37TH STREET
SUITE 406
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

1651 W 37TH STREET
SUITE 406
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 65-1072769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VON WERNE, BETH
14940 SW 153 STREET,
SUITE 105
MIAMI, FL 33142 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: CTD
Name: SALEM, MICHEAL
Address: 1651 W 37TH STREET, SUITE 406
City-St-Zip: HIALEAH, FL 33012

Title: D
Name: HOBSON, FRED
Address: 1900 NE 164TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D
Name: CAMERON, LYNNE
Address: 8900 NW 18 TERRACE
City-St-Zip: MIAMI, FL 33172

Title: D
Name: HUNT, PAUL
Address: 1651 WEST 37TH STREET #406
City-St-Zip: HIALEAH, FL 33012

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL SALEM

CTD

06/06/2011

Electronic Signature of Signing Officer or Director

Date