## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000002604

FILED Apr 30, 2008 Secretary of State

Entity Name: DIVERSITY PLANNING INSTITUTE, INC.

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

1350 EAST SUNRISE BLVD. C/O ARTSERVE FORT LAUDERDALE, FL 33304

Current Mailing Address: New Mailing Address:

3240 SEAWARD DRIVE LAUDERDALE BY THE SEA, FL 33062

FEI Number: 65-1104863 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:

KENNEDY, BEVERLY B GARCIA-ARMSTRONG, INGER 3240 SEAWARD DRIVE 100 N. FEDERAL HWY.

LAUDERDALE BY THE SEA, FL 33062 US SUITE 534

FORT LAUDERDALE, FL 33301 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: INGER GARCIA- ARMSTRONG 04/30/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P.S. ( ) Delete Title: C,S, (X) Change ( ) Addition Name: KENNEDY, BEVERLY B Name: KENNEDY, BEVERLY B

Address: 3240 SEAWARD DRIVE Address: 3240 SEAWARD DRIVE

City-St-Zip: LAUDERDALE BY THE SEA, FL 33062 City-St-Zip: LAUDERDALE BY THE SEA, FL 33062

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PITTMAN, LEN B MS.
 Name:

 Address:
 23398 SW 57TH AVE. APT. 304
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BURRIS, THOMAS E
 Name:

 Address:
 330 OAKS TRAIL SUITE 116
 Address:

 City-St-Zip:
 GARLAND, TX 75043 US
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCCORMICK, NUCCIA
 Name:

 Address:
 11 HARBORAGE ISLE
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33316 US
 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: BEVERLY B. KENNEDY C. S 04/30/2008