

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003058

FILED
Mar 23, 2009
Secretary of State

Entity Name: AARON D. HALL, SR. AND BERNICE SWEET HALL FAMILY FOUNDATION, INC.

Current Principal Place of Business:

13910 N.W. 14TH AVENUE
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

186 NW 86TH ST
MIAMI, FL 33150

New Mailing Address:

FEI Number: 65-1100209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAUSTEIN, DONNA R ESQ.
20803 BISCAYNE BOULEVARD
SUITE 200
AVENTURA, FL 33180 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: D () Delete
Name: HALL, AARON D JR.
Address: 13910 N.W. 14TH AVENUE
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: SCOTT, FRANCENIA
Address: 186 N.W. 86TH STREET
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: LADLER, ERICA S
Address: 205 SCENIC VIEW LANE
City-St-Zip: STONE MOUNTAIN, GA 30087

Title: D () Delete
Name: SCOTT, DEREK S
Address: 186 N.W. 86TH STREET
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: FRANCENIA SCOTT

D

03/23/2009

Electronic Signature of Signing Officer or Director

Date