

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003390

FILED
Jan 17, 2007
Secretary of State

Entity Name: THE ARTHROGRYPOSIS FOUNDATION, INC.

Current Principal Place of Business:

14633 SW 132 AVE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

14633 SW 132 AVE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-1105092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE NORFOLK, MARTHA
14633 SW 132 AVE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

DE NORFOLK, MARTHA C
14633 SW 132 AVE
MIAMI, FL 33186 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: MARTHA C DE NORFOLK

01/17/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: DE NORFOLK, MARTHA
Address: 9240 SUNSET DRIVE #114
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: DE LA HOZ, EDISON
Address: 14633 SW 132ND AVENUE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: ARECES, BARBARA
Address: 9240 SUNSET DRIVE #211
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: DE NORFOLK, MARTHA C
Address: 9240 SUNSET DRIVE #114
City-St-Zip: MIAMI, FL 33173

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 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: MARTHA C DE NORFOLK

PDST

01/17/2007

Electronic Signature of Signing Officer or Director

Date