

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004501

FILED
Jan 13, 2009
Secretary of State

Entity Name: ACCESS FOUNDATION CORPORATION

Current Principal Place of Business:

1749 NE 26TH ST., SUITE F
WILTON MANORS, FL 33305

New Principal Place of Business:

Current Mailing Address:

2100 EAST SAMPLE ROAD
SUITE 202
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 52-2336964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZADEN, RICHARD ESQ.
2850 N. ANDREWS AVE
FORT LAUDERDALE, FL 33311 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: WARDELL, PHIL
Address: 1749 NE 26TH ST, SUITE F
City-St-Zip: FT. LAUDERDALE, FL 33305

Title: D () Delete
Name: ZADEN, RICHARD J
Address: 1749 NE 26TH ST, SUITE F
City-St-Zip: FT. LAUDERDALE, FL 33305

Title: D () Delete
Name: SEILER, JOHN P
Address: 2900 E. OAKLAND PARK BLVD., SUITE 200
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: D () Delete
Name: LOPEZ, PAUL
Address: 501 NE SPANISH CT
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: CLEMONS, LARRY
Address: 1807 N ATLANTIC BLVD
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: D () Delete
Name: AHEARN, MICHAEL
Address: 1749 NE 26TH ST, SUITE F
City-St-Zip: FORT LAUDERDALE, FL 33305

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:

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: ASHRAF BOUTROS

T

01/13/2009

Electronic Signature of Signing Officer or Director

Date