

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000647

FILED  
Feb 28, 2006  
Secretary of State

Entity Name: CHARITIES INTERNATIONAL, INC.

## Current Principal Place of Business:

201 RACQUET CLUB  
S-403  
WESTON, FL 33326

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 550214  
FT LAUDERDALE, FL 33355

## New Mailing Address:

FEI Number: 04-3598953

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUDOFF, LARY D  
201 RACQUET CLUB  
S-403  
WESTON, FL 33326 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: PSTD ( ) Delete  
Name: HUDOFF, LARY D  
Address: 201 RACQUET CLUB S-403  
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete  
Name: BRUCE, MARY JANE  
Address: 6 SPRING RADIAL  
City-St-Zip: OCALA, FL 34472

Title: D ( ) Delete  
Name: ADLER, SHARON  
Address: 3008 BONAVENTURE CIRCLE  
City-St-Zip: PALM HARBOR, FL 34684

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: MOSCOSO, ELIANA  
Address: 201 RACQUET CLUB RD S-403  
City-St-Zip: WESTON, FL 33326

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: LARY HUDOFF

PSTD

02/28/2006

Electronic Signature of Signing Officer or Director

Date