

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001262

FILED
Mar 20, 2009
Secretary of State

Entity Name: SUNSHINE SOCIAL SERVICES, INC.

Current Principal Place of Business:

1480 SW 9TH AVE.
FT. LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

1480 SW 9TH AVE.
FT. LAUDERDALE, FL 33315

New Mailing Address:

FEI Number: 01-0582371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ADLER, MARK L MPH
402 NW 17TH PLACE
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: GEORGIU, CONSTANTINE
Address: 3100 N. OCEAN DR., APT. 2603
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D () Delete
Name: ENGLISH, RONALD S
Address: 2848 NE 35 CT.
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D () Delete
Name: ADLER, MARK L MPH
Address: 402 NW 17TH PLACE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D () Delete
Name: ROSENBERG, HERB
Address: 3700 GALT OCEAN DRIVE, SUITE # 1715
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROGOW, ANTHONY
Address: 4200 HILLCREST DR. #918
City-St-Zip: HOLLYWOOD, FL 33021

Title: D (X) Change () Addition
Name: ZALMAN, ANTHONY
Address: 3699 NE 18TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33309

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: MARK ADLER

ED

03/20/2009

Electronic Signature of Signing Officer or Director

Date