

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001502

FILED
Feb 02, 2009
Secretary of State

Entity Name: THE INSTITUTE FOR COMMUNITY COLLABORATION, INC.

Current Principal Place of Business:

3440 HOLLYWOOD BLVD STE 140
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3440 HOLLYWOOD BLVD STE 140
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 03-0446672 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GOREN, SAM ESQ.
3099 EAST COMMERCIAL BLVD.
SUITE #200
FT LAUDERDALE, FL 33308 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: VC () Delete
Name: WALTERS, SANDRA
Address: 6410 5TH STREET, SUITE 3
City-St-Zip: KEY WEST, FL 33040

Title: PC () Delete
Name: ASSEFF, PATRICIA B
Address: 950 SOUTH SOUTHLAKE DR
City-St-Zip: HOLLYWOOD, FL 33019

Title: C () Delete
Name: PEREZ, MARTA
Address: 1450 NE 2ND AVE #700
City-St-Zip: MIAMI, FL 33132

Title: T () Delete
Name: SCUOTTO, JOSEPH
Address: 10770 WEST OAKLAND PARK BLVD
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: CHERNOFF, JAY R
Address: 17011 NE 19TH AVENUE
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: WALTERS, SANDRA
Address: 6410 5TH STREET, SUITE 3
City-St-Zip: KEY WEST, FL 33040

Title: S (X) Change () Addition
Name: SUZANNE, GUNZBURGER
Address: 115 SOUTH ANDREWS AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: PC (X) Change () Addition
Name: PEREZ, MARTA
Address: 1450 NE 2ND AVE #700
City-St-Zip: MIAMI, FL 33132

Title: VC (X) Change () Addition
Name: SCUOTTO, JOSEPH
Address: 10770 WEST OAKLAND PARK BLVD
City-St-Zip: SUNRISE, FL 33351

Title: T (X) Change () Addition
Name: CHERNOFF, JAY R
Address: 17011 NE 19TH AVENUE
City-St-Zip: MIAMI, FL 33162

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: SANDRA WALTERS

C

02/02/2009

Electronic Signature of Signing Officer or Director

Date