

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 08, 2009
Secretary of State

DOCUMENT# N02000002723

Entity Name: HUMANISTS OF FLORIDA, INC.**Current Principal Place of Business:**C/O JERRY LIEBERMAN
6833 QUAIL HOLLOW BLVD
WESLEY CHAPEL, FL 33544 US**New Principal Place of Business:****Current Mailing Address:**VIRGINIA LIEBERMAN
6833 QUAIL HOLLOW BLVD
WESLEY CHAPEL, FL 33544 US**New Mailing Address:****FEI Number:** 52-1570992 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LIEBERMAN, JERRY
6833 QUAIL HOLLOW BLVD
WESLEY CHAPEL, FL 33544 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:** VP () Delete
Name: HULL, RICHARD T
Address: 3241 HEATHER HILL LANE
City-St-Zip: TALLAHASSEE, FL 32309**Title:** T () Delete
Name: LA SALLE, ROBERT M
Address: 10162 TOPSAIL AVE
City-St-Zip: ENGLEWOOD, FL 34224**Title:** D () Delete
Name: LIEBERMAN, VIRGINIA
Address: 6833 QUAIL HOLLOW BLVD.
City-St-Zip: WESLEY CHAPEL, FL 33544**Title:** () Delete
Name:
Address:
City-St-Zip:**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:** P () Change (X) Addition
Name: LIEBERMAN, JEROME PRES.
Address: 6833 QUAIL HOLLOW BLVD.
City-St-Zip: WESLEY CHAPEL, FL 33544

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: VIRGINIA LIEBERMAN

D

09/08/2009

Electronic Signature of Signing Officer or Director

Date