

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002739

FILED
Apr 30, 2009
Secretary of State

Entity Name: HARDING VILLAGE, INC.

Current Principal Place of Business:

2828 CORAL WAY
STE. 500
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2828 CORAL WAY
STE. 500
MIAMI, FL 33145

New Mailing Address:

FEI Number: 75-3046656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRFOUR SUPPORTIVE HOUSING INC
2828 CORAL WAY, STE. 500
MIAMI, FL 33145 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: MESSAR, JOHN
Address: 801 BRICKER AVE. STE. 2450
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: GARCIA, TERE
Address: 2601 S. BAYSHORE DR. 10TH FLOOR
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: CASALE, FRANKLYN
Address: 16400 NW 32 AVE
City-St-Zip: MIAMI, FL 33054

Title: VC () Delete
Name: OJEDOA, ALAN
Address: 2828 CORM WAY STE. 500
City-St-Zip: MIAMI, FL 33145

Title: TD () Delete
Name: STEPHEN, DANNER
Address: 1200 BRICKELL AVE. STE 700
City-St-Zip: MIAMI, FL 33131

Title: P () Delete
Name: BERMAN, STEPHANIE
Address: 2828 CORAL WAY STE. 500
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VC (X) Change () Addition
Name: MESSER, JOHN
Address: 801 BRICKELL AVE. STE. 2450
City-St-Zip: MIAMI, FL 33131

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

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

Title: VC (X) Change () Addition
Name: OJEDA, ALAN
Address: 2828 CORM WAY STE. 500
City-St-Zip: MIAMI, FL 33145

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: STEPHANIE BERMAN

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date