

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003200

FILED
Feb 17, 2006
Secretary of State

Entity Name: NEW PROVIDENCE LODGE, INC.

Current Principal Place of Business:

941 NW 3RD AVENUE
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

15286 SW 178TH TERRACE
MIAMI, FL 33187

New Mailing Address:

FEI Number: 35-2167009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASON, RONALD
2037 SW 94TH STREET
MIAMI, FL 33147 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: TREA () Delete
Name: MCDONALD, KEMPER MR.
Address: 6732 AZALEA DRIVE
City-St-Zip: MIRAMAR, FL 33023

Title: T (X) Delete
Name: RODRIGUEZ, STEVE MR.
Address: 19320 WHISPERING PINE ROAD
City-St-Zip: MIAMI, FL 33157

Title: T () Delete
Name: JONES, CHARLES L MR.
Address: 16911 SW 108TH AVENUE
City-St-Zip: MIAMI, FL 33157

Title: P () Delete
Name: ELAMIN, RICHARD MR.
Address: 15286 S.W. 167 TERRACE
City-St-Zip: MIAMI, FL 33187

Title: VP () Delete
Name: BULLARD, SHERMAN MR.
Address: 1851 N.W. 1ST COURT, APT. 3
City-St-Zip: MIAMI, FL 33136

Title: S () Delete
Name: YALLEDY, TRACY MR.
Address: 1020 N.W. 145 TERRACE
City-St-Zip: MIAMI, FL 33168

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

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 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: RICHARD ELAMIN

P

02/17/2006

Electronic Signature of Signing Officer or Director

Date