

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005605

FILED
Jan 16, 2007
Secretary of State

Entity Name: KIDS HOPE UNITED-FLORIDA REGION, INC.

Current Principal Place of Business:

10720 CARIBBEAN BLVD
SUITE 500
MIAMI, FL 33189 US

New Principal Place of Business:

Current Mailing Address:

10720 CARIBBEAN BLVD
SUITE 500
MIAMI, FL 33189 US

New Mailing Address:

FEI Number: 54-2082539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEROS, GEORGE
C/O GRAY ROBINSON
301 S BRONOUGH ST
TALLAHASSEE, FL 32301 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: P () Delete
Name: SINNOTT, MARTIN
Address: 122 SOUTH MICHIGAN AVE, SUITE 1500
City-St-Zip: CHICAGO, IL 60603 US

Title: C () Delete
Name: PINO, JORGE
Address: 4000 PONCE DE LEON BLVD, STE 470
City-St-Zip: CORAL GABLES, FL 33146 US

Title: D () Delete
Name: TOM, QUARLES
Address: 150 FLAGLER ST, STE 2500
City-St-Zip: MIAMI, FL 33130 US

Title: D () Delete
Name: MORALES, ADRIANA DR
Address: 10177 BLOOMSBURY AVE
City-St-Zip: CORDOVA, TN 38016 US

Title: D () Delete
Name: THOMLINSON, BARBARA DR
Address: 17555 COLLINS AVENUE, APT. 605
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: D () Delete
Name: SATCHEL, FRANK R JR
Address: 806 SE 3RD STREET
City-St-Zip: MULBERRY, FL 33860

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SINNOTT, MARTIN
Address: 111 E WACKER DR, SUITE 325
City-St-Zip: CHICAGO, IL 60601 US

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

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

Title: D (X) Change () Addition
Name: CALEV, BARBARA
Address: PO BOX 59-5969
City-St-Zip: MIAMI, FL 33256 US

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: MARTIN SINNOTT

P

01/16/2007

Electronic Signature of Signing Officer or Director

Date