

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009721

FILED  
Apr 26, 2007  
Secretary of State

**Entity Name:** FONRHAU FOUNDATION OF FLORIDA, INC.

**Current Principal Place of Business:**

5401 NE 2ND AVE  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

5401 NE 2ND AVE  
MIAMI, FL 33137

**New Mailing Address:**

701 BRICKELL AVENUE  
SUITE 3000  
MIAMI, FL 33131

FEI Number: 30-0151429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

INTRASTATE REGISTERED AGENT CORP.  
701 BRICKELL AVE STE 3000  
MIAMI, FL 33131 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: DP ( ) Delete  
Name: RHAU, MARIE  
Address: 1000 ISLAND BLVD UNIT 706  
City-St-Zip: MIAMI, FL 331604938

Title: DV ( ) Delete  
Name: RHAU, SARAH S  
Address: 1000 ISLAND BLVD UNIT 706  
City-St-Zip: MIAMI, FL 331604938

Title: DS ( ) Delete  
Name: HYACINTHE, BERNADETTE G  
Address: 8947 PALM TREE LANE  
City-St-Zip: PEMBROKE PINES, FL 33024

**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:

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: MARIE RHAU

DP

04/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date