

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003586

FILED  
Jul 10, 2006  
Secretary of State

**Entity Name:** MAKE A DIFFERENCE SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

333 KELSEY PARK CIR.  
PALM BCH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

333 KELSEY PARK CIR.  
PALM BCH GARDENS, FL 33410

**New Mailing Address:**

**FEI Number:** 47-0917687      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MILLIGAN, ALPHONSO S ESQ.  
2580 METROCENTRE BLVD., SUITE 6  
W. PALM BCH, FL 33407 US

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: D ( ) Delete  
Name: COPPOCK, MARK S  
Address: 333 KELSEY PARK CIR.  
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: D ( ) Delete  
Name: HOWARD, BETSY  
Address: P. O. BOX 701  
City-St-Zip: PALM BCH GARDENS, FL 33480

Title: D ( ) Delete  
Name: MILLIGAN, ALPHONSO S  
Address: P. O. BOX 3254  
City-St-Zip: W. PALM BCH, FL 334023254

Title: D ( ) Delete  
Name: KAHLE, CRAIG U  
Address: 1501 PRESIDENTIAL WAY, SUITE 16  
City-St-Zip: W. PALM BCH, FL 33401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: GEISE, ROBERT  
Address: 17340 BOCA CLUB BLVD.  
City-St-Zip: BOCA RATON, FL 33487

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: MARK S. COPPOCK

PRES

07/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date