

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005360

FILED  
Apr 20, 2005  
Secretary of State

Entity Name: HERMON COMMUNITY SERVICES CENTER ,INC.

## Current Principal Place of Business:

6102 FILLMORE ST.  
HOLLYWOOD, FL 33024

## New Principal Place of Business:

## Current Mailing Address:

8400 N. SHERMAN CIRCLE #403  
MIRAMAR, FL 33025

## New Mailing Address:

FEI Number: 54-2116259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARIS, KENOL  
8400 N. SHERMAN CIRCLE #403  
MIRAMAR, FL 33025 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: ED ( ) Delete  
Name: ARIS, KENOL  
Address: 8400 N. SHERMAN CIRCLE #403  
City-St-Zip: MIRAMAR, FL 33025

Title: VP ( ) Delete  
Name: DELVA, FRANTZ  
Address: 2223 NOVA VILLAGE DR  
City-St-Zip: DAVIE, FL 33317

Title: S ( ) Delete  
Name: OBAS, ROSE VIVIANE  
Address: 304 NE 143TH STREET  
City-St-Zip: MIAMI, FL 33161

Title: T ( ) Delete  
Name: DEROGNE, MACKINGTON  
Address: 1065 NW 106 AVE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: C ( ) Delete  
Name: JANVIER, JEAN ANDRE  
Address: 1340 NE 144 STREET  
City-St-Zip: MIAMI, FL 33161

Title: C ( ) Delete  
Name: PLUVIOSE, CHRISTIAN  
Address: 304 NE 143 STREET  
City-St-Zip: MIAMI, FL 33161

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: OBAS, ROSE VIVIANE  
Address: 3014 SW 142ND AVENUE  
City-St-Zip: MIRAMAR, FL 33027

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

Title: P (X) Change ( ) Addition  
Name: JANVIER, JEAN ANDRE  
Address: 1340 NE 144 STREET  
City-St-Zip: MIAMI, FL 33161

Title: C (X) Change ( ) Addition  
Name: PLUVIOSE, CHRISTIAN  
Address: 3014 SW 142 ND AVENUE  
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENOL ARIS

ED

04/20/2005

Electronic Signature of Signing Officer or Director

Date