

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001210

FILED
Jan 05, 2011
Secretary of State

Entity Name: THE ASSOCIATION OF THE ALUMNI AND FRIENDS OF THE NOVA SOUTHEASTERN UNIVERSITY
POSTGRADUATE ENDODONTIC PROGRAM, INC.

Current Principal Place of Business:

3200 SOUTH UNIVERSITY DRIVE
FT LAUDERDALE, FL 333282018

New Principal Place of Business:

Current Mailing Address:

3200 SOUTH UNIVERSITY DRIVE
FT LAUDERDALE, FL 333282018

New Mailing Address:

FEI Number: 35-2223985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAMEROW, KENNETH DR
NOVA SOUTHEASTERN UNIVERSITY
3200 SOUTH UNIVERSITY DRIVE, ROOM 7335
FT LAUDERDALE, FL 333282018 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
Name: ROUD, TARAS DR
Address: 3319 STATE RD. 7, SUITE 315
City-St-Zip: WELLINGTON, FL 33449

Title: VS
Name: HERRERA, DOUGLAS DR
Address: 1850 S OCEAN DR., UNIT 3308
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: T
Name: SLINGBAUM, JOEL DR
Address: 2221 N. UNIVERSITY DR., SUITE D
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D
Name: NAMEROW, KENNETH DR
Address: NSU CDM, 3200 S UNIVERSITY DRIVE, ROOM 733
City-St-Zip: FT LAUDERDALE, FL 333282018

I hereby 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 all other like empowered.

SIGNATURE: KENNETH NAMEROW

DR.

01/05/2011

Electronic Signature of Signing Officer or Director

Date