2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002282

FILED Apr 27, 2007 Secretary of State

Entity Name: THE NORMA CERINO FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6574 N. STATE ROAD 7 SUITE 384 COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

6574 N. STATE ROAD 7 SUITE 384 COCONUT CREEK, FL 33073

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

CATALDO, MICHELLE
6923 NW 66 WAY
6574 N STATE ROAD 7
PARKLAND, FL 33067 US
COCONUT CREEK, FL 33073 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: JENNIFER WELKER 04/27/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition Name: CATALDO, MICHELLE Name: CATALDO, MICHELLE

 Name:
 CATALDO, MICHELLE
 Name:
 CATALDO, MICHELLE

 Address:
 6923 NW 66 WAY
 Address:
 6475 N STATE RD 7

 City-St-Zip:
 PARKLAND, FL 33067
 City-St-Zip:
 COCONUT CREEK, FL 33073

Title: P () Delete Title: () Change () Addition

 Name:
 WELKER, JENNIFER
 Name:

 Address:
 6960 NW 68 MAN
 Address:

 City-St-Zip:
 PARKLAND, FL 33067
 City-St-Zip:

Title: ST () Delete Title: () Change () Addition

 Name:
 DUNADA, GINA
 Name:

 Address:
 8500 NW 45 ST
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 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: JENNIFER WELKER PRES 04/27/2007