

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003762

**FILED**  
**Jan 21, 2011**  
**Secretary of State**

**Entity Name:** OUR SISTER'S PLACE, INC.

**Current Principal Place of Business:**

283 US HIGHWAY ONE  
TEQUESTA, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

283 US HIGHWAY ONE  
TEQUESTA, FL 33469

**New Mailing Address:**

**FEI Number:** 20-0932817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAIGUE, HAZEL  
19950 BEACH ROAD  
SUITE 1N  
TEQUESTA, FL 33469 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:** RAIGUE, ALFRED  
**Address:** 19950 BEACH ROAD  
**City-St-Zip:** TEQUESTA, FL 33469

**Title:** D  
**Name:** CONNOR, NANCY  
**Address:** 153 N RIVER DRIVE EAST  
**City-St-Zip:** JUPITER, FL 33458

**Title:** D  
**Name:** MCKENNA, BOBBY  
**Address:** 1202 SUMMERWIND LANE  
**City-St-Zip:** JUPITER, FL 33458

**Title:** D  
**Name:** BURIN, MARK  
**Address:** 2201 MARLAA ISLE WY # 504  
**City-St-Zip:** JUPITER, FL 33477

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:** ALFRED H RAIGUE JR.

**PRES**

**01/21/2011**

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

\_\_\_\_\_  
Date