

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008442

FILED
Feb 17, 2011
Secretary of State

Entity Name: CARIBBEAN HEALTH RESEARCH NETWORK OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

ONE WEST CAMINO REAL STE 212
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

ONE WEST CAMINO REAL STE 212
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 80-0120049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLIER, NICOLE
ONE WEST CAMINO REAL
SUITE 212
BOCA RATON, FL 33432 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, D
Name: KELLIER, NICOLE
Address: ONE WEST CAMINO REAL, SUITE 212
City-St-Zip: BOCA RATON, FL 33432 US

Title: D
Name: KELLIER, MARJORIE
Address: ONE WEST CAMINO REAL, SUITE 212
City-St-Zip: BOCA RATON, FL 33432

Title: D
Name: WILLIAMS, ANDREA
Address: ONE WEST CAMINO REAL, SUITE 212
City-St-Zip: BOCA RATON, FL 33432

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: NICOLE KELLIER

P,D

02/17/2011

Electronic Signature of Signing Officer or Director

Date