

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90315 006 ****61.25

DOCUMENT # N04000010919

1. Entity Name
GUARDIAN SHEPHERD PARENTS ASSOCIATION INC.



Principal Place of Business
**3191 CORAL WAY
SUITE 120
MIAMI, FL 33146**

Mailing Address
**3191 CORAL WAY
SUITE 120
MIAMI, FL 33146**

50037195



New Address

New Address -

2. Principal Place of Business

3. Mailing Address

110 PHOENETIA AVE

110 PHOENETIA AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04082005 Chg-NP CR2E037 (10/03)

City & State

City & State

CORAL GABLES FL

CORAL GABLES FL

Zip
33134

Country
U.S.A

Zip
33134

Country
U.S.A

4. FEI Number

Applied For

20-1913174

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ARAUJO, JOHANNA C
3191 CORAL WAY
MIAMI, FL 33146** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ARAUJO, JOHANNA C
110 PHOENETIA AVE
CORAL GABLES, FL 33134** ☒ Change ☐ Addition ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ARIEHMA, VIRGINIA
3191 CORAL WAY
MIAMI, FL 33146** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ARIEHMA, VIRGINIA
110 PHOENETIA AVE
CORAL GABLES, FL 33134** ☒ Change ☐ Addition ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JOHNSON, RUTH
3191 CORAL WAY
MIAMI, FL 33146** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JOHNSON, RUTH
110 PHOENETIA AVE
CORAL GABLES, FL 33134** ☒ Change ☐ Addition ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

365

JOHANNA C ARAUJO - JOHANNA C ARAUJO - 04.14.05 448.17.30