

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009884

FILED
Apr 24, 2007
Secretary of State

Entity Name: FAGA FOUNDATION, INC.

Current Principal Place of Business:

3613 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3613 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 20-3551060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAGA, CAROL
3613 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065 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: D () Delete
Name: FAGA, CAROL
Address: 3613 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: FAGA, SEAN
Address: 3613 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: MONEREAU, STEPHANE
Address: 1 ANN LEE LANE
City-St-Zip: TAMARAC, FL 33319

Title: D () Delete
Name: HOFFMAN, EVAN
Address: 74 OHIO ROAD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL FAGA

D

04/24/2007

Electronic Signature of Signing Officer or Director

Date