2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 04, 2006
Secretary of State

DOCUMENT# N05000010638

Entity Name: FRIENDS OF PRINCESS MARGARETT HOSPITAL INC.

Current Principal Place of Business:

1118 NW 41ST TERR.
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

1118 NW 41ST TERR.
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: 20-3833355 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SMITH, CLARENCE F
1118 NW 41ST TERR.
LAUDERHILL, FL 33313 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: PDT ( ) Delete
Name: SMITH, CLARENCE F
Address: 1118 NW 41ST TERR.
City-St-Zip: LAUDERHILL, FL 33313

Title: SD ( ) Delete
Name: SMITH, ENA I
Address: 1118 NW 41ST TERR.
City-St-Zip: LAUDERHILL, FL 33313

Title: VD ( ) Delete
Name: JAMES, JANET
Address: 6913 SW 38TH ST.
City-St-Zip: MIRAMAR, FL 33023

Title: D ( ) Delete
Name: INNIS, CLAUDETTE
Address: 2575 NW 49TH AVE.
City-St-Zip: LAUDERDALE LAKES, FL 33313

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: CLARENCE F. SMITH MR. 07/04/2006

Electronic Signature of Signing Officer or Director — Date