# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 26, 2008**
**Secretary of State**

DOCUMENT# N05000012513

**Entity Name:** 441 GROUP, INC.

**Current Principal Place of Business:**

1452 N. STATE ROAD 7
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

1452 N. STATE ROAD 7
MARGATE, FL 33063

**New Mailing Address:**

**FEI Number: 20-5172449** **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:**

ASSINI, SAM R
2700 W ATLANTIC BLVD. SUITE 200-9
POMPANO BEACH, FL 33069 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: DP ( ) Delete
Name: DEL-CARPIO, GUIDO
Address: 1452 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

Title: DT ( ) Delete
Name: MCLAUGHLIN, DENIS B
Address: 1452 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

Title: DS ( ) Delete
Name: CROWLEY, FRAN
Address: 1452 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition
Name: SMITH, HARRY F
Address: 1452 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

Title: DT (X) Change ( ) Addition
Name: SMITH, DEVRA G
Address: 1452 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

Title: DS (X) Change ( ) Addition
Name: EATON, CAROL
Address: 1452 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify 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: DEVRA G. SMITH DT 07/26/2008
Electronic Signature of Signing Officer or Director — Date