

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05105

FILED
Apr 30, 2008
Secretary of State

Entity Name: MACNEAL-GROVES CENTER FOR CHILDREN, INC.

Current Principal Place of Business:

1435 NW 32ND STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1435 NW 32ND STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 59-2538248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVIND, JOHN
1435 NW 32ND STREET
MIAMI, FL 33142 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: PD () Delete
Name: LAVIND, JOHN
Address: 1435 NW 32ND STREET
City-St-Zip: MIAMI, FL 33142

Title: TD () Delete
Name: GLOVER, EVELINE
Address: 5000 NW 15TH AVENUE
City-St-Zip: MIAMI, FL 33142

Title: SD () Delete
Name: LLOYD, VALERIE
Address: 6934 SW 114TH PLACE
City-St-Zip: MIAMI, FL 33173

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:

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: JOHN LAVIND

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date