

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009195

FILED
Mar 26, 2008
Secretary of State

Entity Name: NEIGHBORHOODS FIRST, INC.

Current Principal Place of Business:

2 S. BISCAYNE BLVD.
SUITE 2350
MIAMI, FL 33133

New Principal Place of Business:

2121 PONCE DE LEON BLVD
SUITE 1280
CORAL GABLES, FL 33134

Current Mailing Address:

2 S. BISCAYNE BLVD.
SUITE 2350
MIAMI, FL 33133

New Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 1280
CORAL GABLES, FL 33134

FEI Number: 20-5477883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLTZMAN, MAX
2 S. BISCAYNE BLVD.
SUITE 2350
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

HOLTZMAN, MAX
2121 PONCE DE LEON BLVD
SUITE 1280
CORAL GABLES, FL 33134 US

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:

03/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLTZMAN, MAX
Address: 2 S. BISCAYNE BLVD., SUITE 2350
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: FREUNDLICH, MARILYN
Address: 2 S. BISCAYNE BLVD., SUITE 2350
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: KRUSZEWSKI, FRANK
Address: 2 S. BISCAYNE BLVD., SUITE 2350
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: LIEBMAN, NANCY
Address: 2 S. BISCAYNE BLVD., SUITE 2350
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLTZMAN, MAX
Address: 2121 PONCE DE LEON BLVD STE 1280
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: FREUNDLICH, MARILYN
Address: 2121 PONCE DE LEON BLVD STE 1280
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: KRUSZEWSKI, FRANK
Address: 2121 PONCE DE LEON BLVD STE 1280
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: LIEBMAN, NANCY
Address: 2121 PONCE DE LEON BLVD STE 1280
City-St-Zip: CORAL GABLES, FL 33134

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: MAX HOLTZMAN

D

03/26/2008

Electronic Signature of Signing Officer or Director

Date