

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90161 013 ****70.00

DOCUMENT # N06000012821

1. Entity Name

NEVE MICHAEL CHILDREN'S VILLAGE, INC.



Principal Place of Business

1300 ST CHARLES PLACE
SUITE 310
PEMBROKE PINES FL 33026

Mailing Address

1300 ST CHARLES PLACE
SUITE 310
PEMBROKE PINES FL 33026

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

AP-PLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~COLUM, ALAN B ESC~~
100 WEST CYPRESS CREEK ROAD
SUITE 700
FT. LAUDERDALE FL 33309

Name

JACK A. STROMFELD

Street Address (P.O. Box Number is Not Acceptable)

1200 ST CHARLES PL #310

City

PEMBROKE PINES FL

Zip Code

33026

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature is required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DP
STROMFELD, JACK
1300 ST CHARLES PLACE, SUITE 310
PEMBROKE PINES FL 33026

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DST
ENNIS, LORELI
3455 STALLION LANE
WESTON FL 33331

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DVP
FRANK, CRAIG
2631 REGALIA WAY
COOPER CITY FL 33026

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DVP
JOFE, STEPHAINE
5880 S.W. 37TH TERRACE
FT. LAUDERDALE FL 33312

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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STREET ADDRESS
CITY- ST- ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
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CITY- ST- ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JACK A. STROMFELD JACK STROMFELD 4/14/08 954-432-3335