

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002259

FILED
Jul 21, 2008
Secretary of State

Entity Name: FAMILY PROMISE OF SOUTH PALM BEACH COUNTY, INC.

Current Principal Place of Business:

301 YAMATO RD., SUITE 2190
BOCA RATON, FL 33431

New Principal Place of Business:

7805 NW BEACON SQUARE BLVD.
SUITE 205
BOCA RATON, FL 33487

Current Mailing Address:

301 YAMATO RD., SUITE 2190
BOCA RATON, FL 33431

New Mailing Address:

7805 NW BEACON SQUARE BLVD.
SUITE 205
BOCA RATON, FL 33487

FEI Number: 56-2656166 **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:

COX, HENRICUS
5815 WINDSOR CT
BOCA RATON, FL 33496 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: P () Delete
Name: COX, HENRICUS
Address: 5815 WINDSOR CT
City-St-Zip: BOCA RATON, FL 33496

Title: V () Delete
Name: SOMERS, FAYE
Address: 18961 CLOUD LAKE CIRCLE
City-St-Zip: BOCA RATION, FL 33496

Title: S () Delete
Name: ARNOLD, ROSE M
Address: 6714 CANARY PALMS CIRCLE
City-St-Zip: BOCA RATON, FL 33433

Title: () Delete
Name:
Address:
City-St-Zip:

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: T () Change (X) Addition
Name: KAELIN, CHRIS
Address: 511 NE WATERWAY LN
City-St-Zip: BOCA RATON, FL 33432

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: HENRICUS COX

P

07/21/2008

Electronic Signature of Signing Officer or Director

Date