

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002640

FILED
Jan 17, 2012
Secretary of State

Entity Name: THE SANCTUARY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

8670 PASADENA BOULEVARD
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

8670 PASADENA BOULEVARD
PEMBROKE PINES, FL 33024 US

New Mailing Address:

FEI Number: 20-8699943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, THOMAS S PASTOR
8670 PASADENA BOULEVARD
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

BROWN, LASHANDA D PASTOR
8670 PASADENA BOULEVARD
PEMBROKE PINES, FL 33024 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: LASHANDA BROWN

01/17/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: BROWN, THOMAS S PASTOR
Address: 8670 PASADENA BOULEVARD
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VD
Name: BROWN, LASHANDA D PASTOR
Address: 8670 PASADENA BOULEVARD
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: BM
Name: ALLEN, DEBRA A DR.
Address: 890 NW 168TH AVE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: BM
Name: WILLIAMS, MARCUS V
Address: 7400 POWERS AVE APT 383
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: BM
Name: NEWMAN, SHERIKA S DR.
Address: 14411 BALD EAGLE DRIVE
City-St-Zip: FORT MYERS, FL 33912 US

I hereby 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 all other like empowered.

SIGNATURE: LASHANDA BROWN

VD

01/17/2012

Electronic Signature of Signing Officer or Director

Date