## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000004099

FILED Sep 03, 2008 Secretary of State

Entity Name: VIOLENCE INTERVENTION AND PREVENTION SERVICES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2020 NW 171 STREET **1651 WEST 37 STREET** 404

MIAMI, FL 33056

MIAMI, FL 33012

**Current Mailing Address: New Mailing Address:** 

2020 NW 171 STREET **1651 WEST 37 STREET** 

MIAMI, FL 33056 404

MIAMI, FL 33012

FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent:

BROWN, QUEEN 2020 NW 171 STREET MIAMI, FL 33056

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PCEO** (X) Change ( ) Addition () Delete BROWN, QUEEN BROWN, QUEEN Name: Name:

Address: 2020 NW 171 STREET Address: **1651 WEST 37 STREET** City-St-Zip: MIAMI, FL 33056 City-St-Zip: MIAMI, FL 33012

Title: Title: (X) Change ( ) Addition ( ) Delete FLETCHER, ANGELA Name: Name: FLETCHER, ANGELA

Address: 2020 NW 171 STREET Address: 1651 WEST 37 STREET City-St-Zip: MIAMI, FL 33056 City-St-Zip: HIALEAH, FL 33012

Title: () Delete Title: (X) Change ( ) Addition

THOMPSON, ELIZABETH MATURAH, FAY Name: Name: Address: 18503 SW 6 STREET Address: **1651 WEST 37 STREET** City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: HIALEAH, FL 33012

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: QUEEN BROWN MS 09/03/2008