

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005592

FILED
May 03, 2008
Secretary of State

Entity Name: SHOENSTADT MOVEMENT OF FLORIDA, INC.

Current Principal Place of Business:

737 NORTH CRESCENT DRIVE
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

737 NORTH CRESCENT DRIVE
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 65-0581325 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

ASANZA, LUIS MD
737 N CRESCENT DR
HOLLYWOOD, FL, FL 33021 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: LUIS ASANZA M.D.

05/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ASANZA, KATUZHKA
Address: 737 NORTH CRESCENT DRIVE
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: ASANZA, LUIS
Address: 737 NORTH CRESCENT DRIVE
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: MAGGIO, MARITZA
Address: 737 NORTH CRESCENT DRIVE
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: ASANZA, KATUZHKA
Address: 737 NORTH CRESCENT DRIVE
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: MAGGIO, MARITZA
Address: 737 N. CRESCENT
City-St-Zip: HOLLYWOOD, FL 33021

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: LUIS ASANZA M.D.

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05/03/2008

Electronic Signature of Signing Officer or Director

Date