

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007537

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** FLORIDA FRAGILE X FAMILIES FOUNDATION, INC.

**Current Principal Place of Business:**

13590 SW 70 AVENUE  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

13590 SW 70 AVENUE  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** 26-0654462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KAPLAN, MICHELE M  
13590 SW 70 AVE  
MIAMI, FL 33156 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:** DP  
**Name:** KAPLAN, MICHELE M  
**Address:** 13590 SW 70 AVE  
**City-St-Zip:** MIAMI, FL 33156

**Title:** DVP  
**Name:** CHARTOUNI-DE LA SERN, VANESSA  
**Address:** 299 HARBOR DRIVE  
**City-St-Zip:** KEY BISCAWAYNE, FL 33149 US

**Title:** D  
**Name:** GRIMMEL, MARC  
**Address:** 714 NW 38 AVENUE  
**City-St-Zip:** DEERFIELD BEACH, FL 33442 US

**Title:** DS  
**Name:** CHARTOUNI-CALLE, CHRISTINA  
**Address:** 340 HARBOR DRIVE  
**City-St-Zip:** KEY BISCAWAYNE, FL 33149 US

**Title:** DT  
**Name:** KAPLAN, PAUL S  
**Address:** 13590 SW 70 AVENUE  
**City-St-Zip:** MIAMI, FL 33156

**Title:** D  
**Name:** ROLLNICK, ARI  
**Address:** 6545 SW 100 STREET  
**City-St-Zip:** MIAMI, FL 33156 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: MICHELE KAPLAN

DP

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date