

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2008  
Secretary of State**

DOCUMENT# N07000009539

Entity Name: GENESIS INTERNATIONAL FOUNDATION, INC.

**Current Principal Place of Business:**

2650 SW 83RD AVE  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

2650 SW 83RD AVE  
MIRAMAR, FL 33025

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired (X)

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

CHRISTIE, NOREEN  
2650 SW 83RD AVE  
MIRAMAR, FL 33025      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:                      CHRISTIE, NOREEN  
Address:                      2650 SW 83RD AVE  
City-St-Zip:                      MIRAMAR, FL 33025

Title:                      T                      ( ) Delete  
Name:                      ROBERTS, LAURA  
Address:                      2786 SW 85TH AVE  
City-St-Zip:                      MIRAMAR, FL 33025

Title:                      S                      ( ) Delete  
Name:                      CRAWFORD, MADGE  
Address:                      19701 NE 1ST AVE  
City-St-Zip:                      MIAMI, FL 33179

**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:

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: NOREEN CHRISTIE

P

04/29/2008

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

\_\_\_\_\_  
Date