

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000709

FILED  
Feb 24, 2011  
Secretary of State

Entity Name: ADOPTION S.T.A.R. (FLORIDA), INC.

## Current Principal Place of Business:

2734 EAST OAKLAND PARK BOULEVARD  
SUITE 101  
FT. LAUDERDALE, FL 33306 US

## Current Mailing Address:

47 PLAZA DRIVE  
WILLIAMSVILLE, NY 14221 US

## New Principal Place of Business:

1040 BAYVIEW DRIVE  
SUITE 318  
FT. LAUDERDALE, FL 33304 US

## New Mailing Address:

FEI Number: 16-1584581      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHERER, MARY ANN ESQ  
2734 E. OAKLAND PARK BLVD., SUITE 102  
FORT LAUDERDALE, FL 33306 US

## Name and Address of New Registered Agent:

FRIED, MICHELE CHAIR  
12259 EAGLES LANDING WAY  
BOYNTON BEACH, FL 33437 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: MICHELE FRIED

02/24/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: CHICK, SHARON  
Address: 122 GREENCASTLE  
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: S  
Name: TINNESZ, CHRISTINE DR.  
Address: 7278 EAST QUAKER ROAD  
City-St-Zip: ORCHARD PARK, NY 14127 US

Title: T  
Name: FRIED, CHUCK  
Address: 89 SANDHURST LANE  
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: D  
Name: D'ARIANO, ILANA  
Address: 6600 BOULEVARD EAST  
City-St-Zip: WEST NEW YORK, NJ 07093 US

Title: C  
Name: MICHELE, FRIED  
Address: 89 SANDHURST LANE  
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: G  
Name: DUELL, ALEC H HONORAB  
Address: 3102 KRUEGER ROAD  
City-St-Zip: NORTH TONAWANDA, NY 14120 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 FRIED

C

02/24/2011

Electronic Signature of Signing Officer or Director

Date