

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002488

FILED
Jan 26, 2009
Secretary of State

Entity Name: THE MORRIS WERNICK COMMUNITY FUND, INC.

Current Principal Place of Business:

9204 NW 2ND STREET
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

9204 NW 2ND STREET
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 61-1558867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WERNICK, ROBERT
1881 NORTH UNIVERSITY AVENUE
SUITE 104
CORAL SPRINGS, FL 33071 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: D () Delete
Name: WERNICK, STEVEN J
Address: 200 S. BISCAYNE BLVD., SUITE 2500
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: WERNICK, ROBERT
Address: 1881 NORTH UNIVERSITY DRIVE SUITE 104
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: SLAVIS, ARIN J
Address: 1000 VENETIAN CAUSEWAY, APT. 810
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: WERNICK, KAREN
Address: 9204 NW 2ND STREET
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: NELSON-WERNICK, ELEANOR
Address: 9204 NW 2ND STREET
City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

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

Title: D () Change (X) Addition
Name: TARTER, MICHELLE
Address: 2451 NE 49TH ST. #210
City-St-Zip: FT. LAUDERDALE, FL 33308

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: ROBERT WERNICK

D

01/26/2009

Electronic Signature of Signing Officer or Director

Date