

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002488

FILED  
Apr 22, 2011  
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  
**Name:** WERNICK, STEVEN J  
**Address:** 1450 BRICKELL AVENUE, SUITE 2300  
**City-St-Zip:** MIAMI, FL 33131

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

**Title:** D  
**Name:** LIMA, NIVEA  
**Address:** 621 CYPRESS LAKE BLVD., APT G  
**City-St-Zip:** DEERFIELD BEACH, FL 33064

**Title:** D  
**Name:** KLINE, ROBERT M  
**Address:** 654 LAKEWOODE CIR W  
**City-St-Zip:** DELRAY BEACH, FL 33445

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

**Title:** D  
**Name:** MILLER, ROSA  
**Address:** 2200 NW 3RD COURT  
**City-St-Zip:** BOCA RATON, FL 33431

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:** STEVEN WERNICK

D

04/22/2011

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

\_\_\_\_\_  
Date