2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 24, 2009
Secretary of State

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Entity Name: DON'T DISMISS DEPRESSION FOUNDATION, INC.

Current Principal Place of Business:

3200 NE 36TH STREET
APT. 803
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

3200 NE 36TH STREET
APT. 803
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

3200 NE 36TH STREET
SUITE 803
FORT LAUDERDALE, FL 33308 US

FEI Number: 26-2352395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GILBERTSON, STEPHEN W CPA
2740 E. OAKLAND PARK BOULEVARD
SUITE 206
FORT LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

POWERS, MICHAEL E CPA
33200 NE 36TH STREET
SUITE 803
FORT LAUDERDALE, FL 33308 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: MICHAEL E. POWERS CPA 06/24/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: POWERS, EDWARD J JR
Address: 3200 NE 36TH STREET, APT 803
City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: D ( ) Delete
Name: DIODATI, CARMINE
Address: 3200 NE 36TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: D ( ) Delete
Name: GRACE, CHARLES
Address: 11340 W OLYMPIC BLVD APT 185
City-St-Zip: LOS ANGELES, CA 90064 US

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: EDWARD J. POWERS, CFA PSTD 06/24/2009
Electronic Signature of Signing Officer or Director Date