

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008555

FILED
May 21, 2009
Secretary of State

Entity Name: FARA'S PLACE, INC.

Current Principal Place of Business:

6542 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

6542 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 30-0515491 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:

Name and Address of New Registered Agent:

KING, SUSAN M ESQ.
2255 GLADES ROAD
STE 335W
BOCA RATON, FL 33431 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOFFMAN, RANDY H
Address: 6542 NEWPORT LAKE CIRCLE
City-St-Zip: BOCA RATON, FL 33496

Title: V () Delete
Name: FLAX, MICHAEL DR.
Address: 2499 BANYAN ROAD
City-St-Zip: BOCA RATON, FL 33432

Title: T () Delete
Name: GREEN, BRUCE S DR.
Address: 5500 2ND AVENUE
City-St-Zip: BOCA RATON, FL 33487

Title: S () Delete
Name: KING, SUSAN M ESQ.
Address: 2255 GLADES ROAD STE 335W
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOFFMAN, RANDIE H
Address: 6542 NEWPORT LAKE CIRCLE
City-St-Zip: BOCA RATON, FL 33496

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: RANDIE HOFFMAN

P

05/21/2009

Electronic Signature of Signing Officer or Director

Date