

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011406

FILED
Apr 10, 2012
Secretary of State

Entity Name: DA'MAURI DMAN ROBINSON CANCER FOUNDATION, INC

Current Principal Place of Business:

2990 NW 55TH STREET
MIAMI, FL 33142

New Principal Place of Business:

22230 SW 107 AVE
1
MIAMI, FL 33170

Current Mailing Address:

PO BOX 470943
MIAMI, FL 33247

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MISSICK, MARCIA
5592 NW 12 COURT
2
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

MISSICK, MARCIA
775 NW 122 ST
MIAMI, FL 33168 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: MARCIA MISSICK

04/10/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: EXED
Name: JACOBS, LATOYA
Address: PO BOX 470943
City-St-Zip: MIAMI, FL 33247

Title: D
Name: COLEMAN, NAKIESHA
Address: P O BOX 470943
City-St-Zip: MIAMI, FL 33247

Title: D
Name: BAILEY, ULRICA L
Address: P O BOX 470943
City-St-Zip: MIAMI, FL 33247

Title: D
Name: COLEMAN, CLINTON
Address: PO BOX 470943
City-St-Zip: MIAMI, FL 33247

Title: D
Name: SYMONETTE, SHAMIKIA
Address: PO BOX 470943
City-St-Zip: MIAMI, FL 33247

Title: D
Name: NICHOLS, LAVELL
Address: P O BOX 470943
City-St-Zip: MIAMI, FL 33247

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: L JACOBS

EXED

04/10/2012

Electronic Signature of Signing Officer or Director

Date