

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009749

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** FAMILIES FOR ALIMONY REFORM, INC.

**Current Principal Place of Business:**

10500 ULMERTON ROAD  
726-205  
LARGO, FL 33771

**New Principal Place of Business:**

**Current Mailing Address:**

10500 ULMERTON ROAD  
726-205  
LARGO, FL 33771

**New Mailing Address:**

**FEI Number:** 27-1068734      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BONNER, JOHN W DR  
1950 LAUREL MANOR DRIVE  
BLDG 184  
THE VILLAGES, FL 32162 US

**Name and Address of New Registered Agent:**

DREW, STEVEN E SR  
10500 ULMERTON RD  
726-205  
LARGO, FL 33771 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: STEVEN E DREW SR

04/28/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DREW, STEVEN E SR  
Address: 10500 ULMERTON ROAD, STE 726-205  
City-St-Zip: LARGO, FL 33771

Title: VP  
Name: TORRES, HECTOR  
Address: P.O. BOX 297954  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP  
Name: REINERTSEN, CHARLES DR  
Address: 2567 TREMONT DRIVE  
City-St-Zip: EUSTIS, FL 32726

Title: VP  
Name: SNYDERS, ROBERT MD  
Address: 3914 EAST EDEN ROCK CIRCLE  
City-St-Zip: TAMPA, FL 33634

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 E DREW SR

PRES

04/28/2010

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

\_\_\_\_\_  
Date