## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10000007999

Apr 27, 2012 Secretary of State

Entity Name: ICENTER COMMUNITY FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

951 SW 4 STREET 1950 S. OCEAN DRIVE 8E

HOMESTEAD, FL 33030 HALLANDALE BEACH, FL 33009 US US

**Current Mailing Address: New Mailing Address:** 

1950 S. OCEAN DRIVE 8E 951 SW 4TH STREET

HOMESTEAD, FL 33030 US HALLANDALE BEACH, FL 33009 US

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

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

BROWN, SARA BROWN, SARA

951 SW 4TH STREET 1950 S. ÓCEAN DRIVE 8E

HOMESTEAD, FL 33030 HALLANDALE BEACH, FL 33009 US 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: 04/27/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

BROWN, SARA Name:

Address: 1950 S. OCEAN DRIVE 8E

City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title:

Name: DILAN, LUIS Address: 1950 NW 10 TER

HOMESTEAD, FL 33030 US City-St-Zip:

Title:

JENNINGS, KEITH Name: 2750 N 29 AVE #120 Address:

City-St-Zip: HOLLYWOOD, FL 33020 US

Title:

Name: ALONGI, JOSEPHINE 1950 S. OCEAN DRIVE 8E Address: City-St-Zip: HALLANDALE BEACH, FL 33009

VΡ Title:

WRIGHT, MICHEAL Name: 10209 SW 20 CT Address: MIRAMAR, FL 33035 City-St-Zip:

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: SARA BROWN Ρ 04/27/2012