

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008274

FILED
Apr 29, 2011
Secretary of State

Entity Name: MI FATHERS, INC.

Current Principal Place of Business:

888 S. ANDREWS AVE., STE 204
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

888 S. ANDREWS AVE., STE 204
FT. LAUDERDALE, FL 33316

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COON, THOMAS T ESQ.
888 S. ANDREWS AVE., STE 204
FT. LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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: D
Name: DOLPH, FRANK
Address: 100 W. CYPRESS CREEK RD., STE 962
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D
Name: COON, THOMAS T JR
Address: 888 S. ANDREWS AVE., STE 204
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: D
Name: VOGEL, THOMAS
Address: 305 S. ANDREWS AVE., STE 801
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D
Name: NAVA, ROBERT
Address: 13730 BISCAYNE BOULEVARD
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: D
Name: FEE, MICHAEL W
Address: 6351 NW 28TH WAY
City-St-Zip: FORT LAUDERDALE, FL 33301

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: THOMAS T. COON, JR.

D

04/29/2011

Electronic Signature of Signing Officer or Director

Date