## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10729

FILED Apr 03, 2008 Secretary of State

Entity Name: TERESIAN INSTITUTE OF FLORIDA, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

3400 SOUTHWEST 99TH AVENUE MIAMI, FL 33165

**Current Mailing Address:** 

**New Mailing Address:** 

3400 SOUTHWEST 99TH AVENUE MIAMI, FL 33165

FEI Number: 58-1793169

GRACIAN, DOLORES

**425 NE 29 STREET** 

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GRACIAN, DOLORES 6600 NE 22ND WAY APT # 2332

WILTON MANORS, FL 33334 US

FORT LAUDERDALE, FL 33308 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:

04/03/2008

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete GRACIAN, DOLORES Name: 425 NE 29 STREET Address:

City-St-Zip: WILTON MANORS, FL 33334

Title: () Delete CAMERON, REGINA Name: Address: 6620 GREEN ST City-St-Zip: HOLLYWOOD, FL 33024

Title: DS () Delete RACHEL, PORTELL

Name: 9650 SW 81ST LN Address: City-St-Zip: MIAMI, FL 33173

( ) Delete Title: DP CHAMORRO, CARMEN M Name:

MIAMI, FL 33165

Address: 3659 SW 99 AVE.

City-St-Zip:

(X) Change ( ) Addition

GRACIAN, DOLORES Name: Address: 6600 NE 22ND WAY, #2332 City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: (X) Change ( ) Addition

Name: CAMERON, REGINA Address: 6620 GREEN ST

City-St-Zip: HOLLYWOOD, FL 33024 US

Title: DS (X) Change ( ) Addition

RACHEL, PORTELL Name: Address: 9650 SW 81ST LN City-St-Zip: MIAMI, FL 33173 US

Title: (X) Change ( ) Addition

Name: CHAMORRO, CARMEN M 3400 SW 99TH AVENUE. Address: City-St-Zip: MIAMI, FL 33165

DT

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: DOLORES GRACIAN Electronic Signature of Signing Officer or Director 04/03/2008

Date