

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004660

FILED
Mar 13, 2012
Secretary of State

Entity Name: THE NOAH HEALTH FOUNDATION, INC

Current Principal Place of Business:

401 E LAS OLAS BLVD
130376
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

401 E LAS OLAS BLVD
130376
FORT LAUDERDALE, FL 33301

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:

JONES, CHERESE N
401 E LAS OLAS BLVD
130376
FORT LAUDERDALE, FL 33301 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: PRES
Name: JONES, CHERESE N
Address: 401 E LAS OLAS BLVD STE 130376
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: VP
Name: DESAUGUSTE, SEBASTIEN S
Address: 401 E LAS OLAS BVD STE 130376
City-St-Zip: FORT LAUDERDALE, FL 33301 US

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: CHERESE N JONES

PRES

03/13/2012

Electronic Signature of Signing Officer or Director

Date