

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010284

FILED
Mar 05, 2012
Secretary of State

Entity Name: NATIONAL PARKINSON FOUNDATION SOUTH FLORIDA, INC.

Current Principal Place of Business:

1501 NW 9TH AVE 1ST FLOOR
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

PO BOX 3616
HALLANDALE, FL 33008

New Mailing Address:

PO BOX 3646
HALLANDALE, FL 33008

FEI Number: 45-3266918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, AUDREY
1501 NW 9TH AVE 1ST FLOOR
MIAMI, FL 33136 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: ARDMAN, AMY
Address: 4050 WEST BROWARD BLVD
City-St-Zip: PLANTATION, FL 33317 US

Title: VP
Name: LAFORGE, MARNE
Address: 3131 HIDDEN HOLLOW LANE
City-St-Zip: DAVIE, FL 33328 US

Title: SEC
Name: MORAN, LUIS
Address: 7891 WEST FLAGLER ST, #390
City-St-Zip: MIAMI, FL 33144 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: AUDREY C WOOD

ED

03/05/2012

Electronic Signature of Signing Officer or Director

Date