

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11060

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** THE COOPERATIVE FEEDING PROGRAM, INC.

**Current Principal Place of Business:**

1 NW 33 TERRACE  
LAUDERHILL, FL 33311 US

**New Principal Place of Business:**

**Current Mailing Address:**

1 NW 33 TERRACE  
LAUDERHILL, FL 33311 US

**New Mailing Address:**

**FEI Number:** 59-2696451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FORMAN, MARTI  
2757 S. OAKLAND FOREST DR. #201  
OAKLAND PARK, FL 33309 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/P  
**Name:** BERGER, CLAIRE  
**Address:** 5101 N W 21 AVE. #300  
**City-St-Zip:** FORT LAUDERDALE, FL 33309 US

**Title:** D/PP  
**Name:** FARO, DOMENIC  
**Address:** 3500 GALT OCEAN DRIVE  
**City-St-Zip:** FT. LAUDERDALE, FL 33308

**Title:** D  
**Name:** ROCKINGHAM, PTOSHA  
**Address:** 10903 BLUE PALM STREET  
**City-St-Zip:** PLANTATION, FL 33324

**Title:** D/T  
**Name:** GELIN, MICHAEL  
**Address:** 6700 N ANDREWS AVENUE #300  
**City-St-Zip:** FORT LAUDERDALE, FL 33309

**Title:** D/S  
**Name:** SOLIMINE, CARA  
**Address:** 450 E. LAS OLAS #1000  
**City-St-Zip:** FT. LAUDERDALE, FL 33301

**Title:** D/VP  
**Name:** CAFFERTY, BOB  
**Address:** 1501 GREEN ROAD, SUITE G  
**City-St-Zip:** DEERFIELD BEACH, FL 33064 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:** MARTI FORMAN

CEO

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date