2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N15903

Entity Name: RETURNED PEACE CORPS VOLUNTEERS OF SOUTH FLORIDA ,INC.

Current Principal Place of Business:

ZELL, GREGORY T.
3231 MARY STREET
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

C/O GREGORY T. ZELL, ESQ.
P.O. BOX 311044
MIAMI, FL 33231 US

New Mailing Address:

FEI Number: 59-2870906 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZELL, GREGORY T.
3231 MARY STREET
MIAMI, FL 33133 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 ( ) Delete
Name: EISENHAUER, EMILY E
Address: 720 15 ST. APT. 8
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VP ( ) Delete
Name: FRANKEL, LISA
Address: 900 BAY DRIVE APT 407
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: SEC ( ) Delete
Name: FARRIOR, NATALIE
Address: 7800 COLLINS AVE 506
City-St-Zip: MIAMI, FL 33141 US

Title: CONT ( ) Delete
Name: HANCOCK, MARVIN
Address: 24310 WOODSAGE DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: TREA (X) Delete
Name: OLSEN, JAKES
Address: 240 76TH STREET
City-St-Zip: MIAMI BEACH, FL 33141 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: FARRIOR CASTRO, NATALIE
Address: 7800 COLLINS AVE. #506
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: TREA (X) Change ( ) Addition
Name: WHITNEY, ELIZABETH
Address: 220 MADEIRA AVE. #8
City-St-Zip: CORAL GABLES, FL 33134 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: EMILY EISENHAUER PRES 04/17/2009

Electronic Signature of Signing Officer or Director — Date