

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19208

FILED
Mar 11, 2009
Secretary of State

Entity Name: TRANSPLANT FOUNDATION, INC.

Current Principal Place of Business:

701 SW 27TH AVE.
STE. 705
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

701 SW 27TH AVE.
STE. 705
MIAMI, FL 33135

New Mailing Address:

FEI Number: 59-2767754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPTON, ELI
TRANSPLANT FOUNDATION
701 SW 27TH AVE, STE 705
MIAMI, FL 33135 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: PD () Delete
Name: HELMS, SCOTT MR.
Address: 515 EAST LAS OLAS BLVD. SUITE 960
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: SEC () Delete
Name: KLEIN, PAUL
Address: 1525 BREAKWATER TERRACE
City-St-Zip: HOLLYWOOD, FL 33019

Title: VPD () Delete
Name: GOMEZ, IVAN A MR
Address: 601 BRICKELL KAY DRIVE, SUITE 507
City-St-Zip: MIAMI, FL 33131

Title: TD () Delete
Name: LOWENSTEIN, ELLIOT
Address: 2100 SALZEDO ST. STE. 303
City-St-Zip: COROL GABLES, FL 33134

Title: PE () Delete
Name: GOLDSTEIN, JEFF MR
Address: 3564 WEST FAIRVIEW STREET
City-St-Zip: COCONUT GROVE, FL 33131

Title: IPP () Delete
Name: KOLSKY, ALLAN
Address: 11098 BISCAYNE BLVD., SUITE 103
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HELMS, SCOTT MR.
Address: 515 EAST LAS OLAS BLVD. SUITE 960
City-St-Zip: FT. LAUDERDALE, FL 33301

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

Title: VP (X) Change () Addition
Name: GOMEZ, IVAN A MR
Address: 601 BRICKELL KAY DRIVE, SUITE 507
City-St-Zip: MIAMI, FL 33131

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

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

Title: COO (X) Change () Addition
Name: COMPTON, ELI MS
Address: 701 SW 27 A., SUITE 705
City-St-Zip: MIAMI, FL 33135

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: ELI COMPTON

MS

03/11/2009

Electronic Signature of Signing Officer or Director

Date