2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2006 8:00 am
Secretary of State
07-27-2006 90016 006 ****70.00

DOCUMENT # N27281

1. Entity Name
SOS CHILDREN'S VILLAGES - FLORIDA, INC.

Principal Place of Business	Mailing Address
3681 NW 59TH PLACE COCONUT CREEK, FL 33073	3681 NW 59TH PLACE COCONUT CREEK, FL 33073

07102006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0080301 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MASI, BETTY
565 E. HILLSBORO BLVD
DEERFIELD BEACH, FL 33441

7. Name and Address of New Registered Agent

Name BRENT COLSTON
Street Address (P.O. Box Number is Not Acceptable) 6401 NOB HILL ROAD
City TAMARAC FL Zip Code 33321

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] BRENT COLSTON 7-13-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MASI, BETTY 565 E. HILLSBORO BLVD DEERFIELD BEACH, FL 33441	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SOLOMON, MARK 3840 COCONUT CREEK PARKWAY COCONUT CREEK, FL 33066	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LUZIM, RONALD 9900 W. SAMPLE RD. #400 CORAL SPRINGS, FL 33065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S COLSTON, BRET 1700 S. PWERLINE ROAD DEERFIELD BEACH, FL 33442	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ART FALCONE 1951 NW 19 STREET #200 BOCA RATON FL 33431 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WALDMAN, JAMES W. 2751 W. ATLANTIC BLVD. POMPANO BEACH, FL 33069	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JAMES WALDMAN 1900 W COMMERCIAL # 180 FORT LAUDERDALE FL 33309 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAREY, CHRIS 4400 S. STATE RD. 7 FT. LAUDERDALE, FL 33314	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marjory Bruszer Marjory BruszerMARJORY BRUSZER-954 420 5030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #