

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28210

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** CILIA FOUNDATION, INCORPORATED

**Current Principal Place of Business:**

18751 WEST DIXIE HIGHWAY, #106  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

18851 NE 29TH AVE  
SUITE 700  
AVENTURA, FL 33180 US

**Current Mailing Address:**

18751 WEST DIXIE HIGHWAY, #106  
AVENTURA, FL 33180 US

**New Mailing Address:**

18851 NE 29TH AVE  
SUITE 700  
AVENTURA, FL 33180 US

**FEI Number:** 50-0104351

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BELL, THOMAS P  
201 N UNIVERSITY DRIVE  
SUITE 103  
PLANTATION, FL 33324 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:** PSD  
**Name:** GINA HORTANCE  
**Address:** 18851 NE 29TH AVE  
**City-St-Zip:** AVENTURA, FL 33180

**Title:** S  
**Name:** RAPHAEL , LUCIE  
**Address:** 3876 PENSCOLA DRIVE  
**City-St-Zip:** LANTANA, FL 33462

**Title:** VPSD  
**Name:** PIERRE-LOUIS, ELIANE,M  
**Address:** 3850 N.W. 208TH STREET  
**City-St-Zip:** CAROL CITY, FL 33055

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:** GINA HORTANCE

PSD

04/30/2010

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

\_\_\_\_\_  
Date