

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 15, 2009
Secretary of State

DOCUMENT# N31737

Entity Name: GREATER FORT LAUDERDALE SISTER CITIES INTERNATIONAL, INC**Current Principal Place of Business:**101 N.E. 3RD AVENUE
SUITE 300
FT. LAUDERDALE, FL 33301**New Principal Place of Business:****Current Mailing Address:**101 N.E. 3RD AVENUE
SUITE 300
FT. LAUDERDALE, FL 33301**New Mailing Address:****FEI Number:** 65-0194426**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NAIMOLI, STEVEN P
1400 BAYVIEW DR
#2
FORT LAUDERDALE, FL 33304 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:** P () Delete
Name: WINFIELD, MARIANNE
Address: 301 NE 3RD AVE, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33301 US**Title:** T () Delete
Name: NAIMOLI, STEVEN P
Address: 101 N.E. 3RD AVE., SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33301 US**Title:** VPD () Delete
Name: NAIMOLI, KIM A
Address: 101 N.E. 3RD AVE., SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33301 US**Title:** S () Delete
Name: WEIDMAN-MCGREGOR, BRENDA
Address: 101 N.E. 3RD AVE., SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33301 US**Title:** V () Delete
Name: CAMERON, BETSY
Address: 301 NE 3RD AVENUE, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33301**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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Name:
Address:
City-St-Zip:**Title:** D () Change (X) Addition
Name: MCCORMICK, NUCCIA
Address: 301 NE 3RD AVENUE, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33301

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: STEVEN P NAIMOLI

T

09/15/2009

Electronic Signature of Signing Officer or Director

Date