

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33729

FILED
Jan 06, 2007
Secretary of State

Entity Name: FRANZBLAU MEMORIAL HOME, INC.

Current Principal Place of Business:

%AINSLEE R. FERDIE
717 PONCE DE LEON BLVD #215
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

C/O ED ZABACK
301 SW 135 AVENUE C-301
PEMBROKE PINES, FL 330271633

New Mailing Address:

FEI Number: 65-0144660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERDIE, AINSLEE R
717 PONCE DE LEON BLVD #215
CORAL GABLES, FL 33134 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: DP () Delete
Name: ZABACK, EDWARD
Address: 301 SW 135TH AVE #C301
City-St-Zip: PEMBROKE PINES, FL 330271633

Title: DST () Delete
Name: TURK, MAX
Address: 13550 SW 6TH CT #A312
City-St-Zip: PEMBROKE PINES, FL 330271626

Title: DV () Delete
Name: FEILER, BERNARD
Address: 13450 SW 3RD STREET #D-18
City-St-Zip: PEMBROKE PINES, FL 330271639

Title: DV () Delete
Name: TYLER, PEARL
Address: 901 COLONY POINT CIR. #320
City-St-Zip: PEMBROKE PINES, FL 330262911

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: EDWARD ZABACK

DP

01/06/2007

Electronic Signature of Signing Officer or Director

Date