

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40649

FILED
Jul 17, 2007
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF NONPROFIT ORGANIZATIONS, INC.

Current Principal Place of Business:

7480 FAIRWAY DRIVE
SUITE 206
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

7480 FAIRWAY DRIVE
SUITE 206
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 65-0241622 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KTG & S REGISTERED AGENT CORPORATION
ONE INTERNATIONAL PLACE
STE 2800
MIAMI, FL 33131 US

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: PAVLOV, MARINA
Address: 7480 FAIRWAY DR, STE 206
City-St-Zip: MIAMI LAKES, FL 33014

Title: C () Delete
Name: WEINSTEIN, BARBARA
Address: 7480 FAIRWAY DR. #206
City-St-Zip: MIAMI LAKES, FL 33014

Title: SD () Delete
Name: SULLIVAN, JACK
Address: 7480 FAIRWAY DR, STE 206
City-St-Zip: MIAMI LAKES, FL 33014

Title: VPD () Delete
Name: FERSHTMAN, STEVEN
Address: 7480 FAIRWAY DR #206
City-St-Zip: MIAMI LAKES, FL 33014

Title: PCD () Delete
Name: GRACEY, LOIS
Address: 7480 FAIRWAY DR #206
City-St-Zip: MIAMI LAKES, FL

Title: CD () Delete
Name: WRIGHT, NAOMI
Address: 7480 FAIRWAY DR 206
City-St-Zip: MIAMI LAKES, FL 33014

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:

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 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: MARINA PAVLOV

PRES

07/17/2007

Electronic Signature of Signing Officer or Director

Date