

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42172

FILED  
Feb 05, 2011  
Secretary of State

**Entity Name:** ALS RECOVERY FUND, INC.

**Current Principal Place of Business:**

7305 SW 123RD STREET  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

7305 SW 123RD STREET  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** 65-0265802

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PACKMAN, KEVIN E  
7305 SW 123RD STREET  
MIAMI, FL 33156 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: VP  
Name: SINGER, DONNA  
Address: ONE GROVE ISLE UNIT 1602  
City-St-Zip: COCONUT GROVE, FL 33133

Title: P  
Name: SILVERMAN, ADAM  
Address: 839 HERITAGE DRIVE  
City-St-Zip: WESTON, FL 33326

Title: DVP  
Name: PACKMAN, CILA  
Address: 10900 SW 93RD AVE.  
City-St-Zip: MIAMI, FL

Title: CEO  
Name: PACKMAN, KEVIN ERIC  
Address: 7305 SW 123RD STREET  
City-St-Zip: PINECREST, FL 33156

Title: T  
Name: ROSENTHAL, KENNETH  
Address: 6521 S.W. 100TH STREET  
City-St-Zip: MIAMI, FL 33156

Title: VP  
Name: PEREZ, ALBERTO  
Address: 323 MALAGA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

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: KEVIN E PACKMAN

CEO

02/05/2011

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

\_\_\_\_\_  
Date