

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42248

FILED
Aug 22, 2006
Secretary of State

Entity Name: THE SENIOR CENTER, INC.

Current Principal Place of Business:

5000 NOB HILL ROAD
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

5000 NOB HILL ROAD
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 65-0245068 **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:

WEISS, RICKY
1401 UNIVERSITY DR 101
CORAL SPGS, FL 33041 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: DVP () Delete
Name: GERALD, WILLIAM
Address: 5104 WHITE OAK LN
City-St-Zip: TAMARAC, FL 33319

Title: EXD () Delete
Name: WEISBERG, GAIL
Address: 5000 NOB HILL ROAD
City-St-Zip: SUNRISE, FL 33351

Title: DT () Delete
Name: DAVID, SOMMER
Address: 7601 BANYON WAY
City-St-Zip: TAMARAC, FL 33321

Title: DVP () Delete
Name: GARRETT, LINDA
Address: 350 E LAS OLAS BLVD
City-St-Zip: FT LAUDERDALE, FL 33301

Title: PD () Delete
Name: FINKELSTEIN, RICHARD
Address: 2520 LAGUNA TERR
City-St-Zip: FT LAUDERDALE, FL 33316

Title: PD () Delete
Name: WILD, STANLEY
Address: 6201 ORCHARD TREE LANE
City-St-Zip: FORT LAUDERDALE, FL 33319

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 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: GAIL WEISBERG

DIR

08/22/2006

Electronic Signature of Signing Officer or Director

Date