

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 06, 2009  
Secretary of State

DOCUMENT# N48108

Entity Name: FONTANEDA SOCIETY, INC.

**Current Principal Place of Business:**

BROWARD COUNTY LIBRARY-DIRECTOR'S OFF.  
100 SOUTH ANDREWS AVENUE  
FORT LAUDERDALE, FL 33301 US

**New Principal Place of Business:**

**Current Mailing Address:**

MARGARET BING  
1940 NE 28TH AVE  
POMPANO BEACH, FL 33062 US

**New Mailing Address:**

FEI Number: 65-0428440      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BUCHBINDER, HARRIET  
BROWARD COUNTY LIBRARY-DIRECTOR'S OFF.  
100 SOUTH ANDREWS AVENUE  
FORT LAUDERDALE, FL 33301 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: S      ( ) Delete  
Name: BING, MARGARET  
Address: 1940 NE 28TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD      ( ) Delete  
Name: BING, MARGARET  
Address: 1940 NE 28TH AVE  
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD      ( ) Delete  
Name: TREBBI, JEAN  
Address: 1350 RIVER PENTEN DR. APT 103  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VD      ( ) Delete  
Name: SATIN, CLAIRE  
Address: 101 SW 1ST STREET  
City-St-Zip: DANIA, FL 33004

**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 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: MARGARET BING

SEC

03/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date