

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48694

FILED
Feb 11, 2009
Secretary of State

Entity Name: COUNT AND COUNTESS DE HOERNLE ALZHEIMERS PAVILION, INC.

Current Principal Place of Business:

325 N.W. 2ND. AVE.
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

325 N.W. 2ND. AVE.
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 65-0344938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CYPEN, STEPHEN
CYPEN & CYPEN
825 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

CYPEN, STEPHEN
CYPEN & CYPEN
777 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 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:

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TOPI, FRED
Address: 2240 NE 38TH ST
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: COB () Delete
Name: FARKAS, DAVID
Address: 6567 SW 20TH COURT
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: BROTMAN, SUSAN
Address: 2424 N FEDERAL HIGHWAY #411
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: GOLDSTEIN, GOLDIE
Address: 23287 BLUEWATER CIRCLE, A-406
City-St-Zip: BOCA RATON, FL 33433

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BROTMAN, SUSAN
Address: 4400 N FEDERAL HIGHWAY #204
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change () Addition
Name: KATZIN, ALFRED J
Address: 7901 SW 6TH COURT #140
City-St-Zip: PLANTATION, FL 33324

Title: D () Change (X) Addition
Name: GUGEL, RITA DR.
Address: PO BOX 21846
City-St-Zip: FT. LAUDERDALE, FL 33335

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: ALICIA SSCHINDLER

E.D.

02/11/2009

Electronic Signature of Signing Officer or Director

Date