2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2009
Secretary of State

DOCUMENT# N49092

Entity Name: PRADER-WILLI FLORIDA ASSOCIATION, INC.

Current Principal Place of Business:

1580 NW 97TH AVE.
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

1580 NW 97TH AVE.
CORAL SPRINGS, FL 33071 US

New Mailing Address:

FEI Number: 59-3128537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GUILIANO, DESIREE
1580 NW 97TH AVE.
CORAL SPRINGS, FL 33071 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:	P	( ) Delete
Name:	TORBERT, MICHELLE	
Address:	17777 285TH ST	
City-St-Zip:	HOMESTEAD, FL 33030	
Title:	COV	( ) Delete
Name:	SANCHEZ, MARIA	
Address:	16199 SW 54TH CT.	
City-St-Zip:	MIRAMAR, FL 33027	
Title:	COV	( ) Delete
Name:	SANCHEZ, MIGUEL	
Address:	16199 SW 54TH CT.	
City-St-Zip:	MIRAMAR, FL 33027	
Title:	S	( ) Delete
Name:	DUNN, LAURA	
Address:	1593 FLAMINO CT	
City-St-Zip:	HOMESTEAD, FL 33035	
Title:	TD	( ) Delete
Name:	GUILIANO, DESIREE	
Address:	1580 NW 97TH AVE	
City-St-Zip:	CORAL SPRINGS, FL 33071	
Title:	BD	( ) Delete
Name:	STALLINGS, JOHN	
Address:	694 SE ASHLEY OAKS WAY	
City-St-Zip:	STUART, FL 34997	

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: DESIREE GUILIANO TD 02/09/2009

Electronic Signature of Signing Officer or Director — Date