2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# N51344

Entity Name: TRANSFLORIDA CENTRE, INC.

Current Principal Place of Business:

1489 W PALMETTO PK RD
STE 300
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

1531 W PALMETTO PARK RD
BOCA RATON, FL 33486 US

New Mailing Address:

160 CONGRESS PARK DRIVE
SUITE 117
DELRAY BEACH, FL 33445 US

FEI Number: 65-0467594 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEBB, GERTRUDE
1531 W PALMETTO PARK RD
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

ROSENBERG, BRIAN CPA
160 CONGRESS PARK DRIVE
117
DELRAY BEACH, FL 33445 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: BRIAN H ROSENBERG 04/26/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LEVINE, BARBARA
Address: 1489 W. PALMETTO PARK RD., STE 300
City-St-Zip: BOCA RATON, FL 33486 US

Title: TD ( ) Delete
Name: WEBB, GERTRUDE
Address: 1489 W. PALMETTO PARK RD., STE 300
City-St-Zip: BOCA RATON, FL 33486 US

Title: SD ( ) Delete
Name: HERALD, SARA
Address: 1489 W. PALMETTO PARK RD., STE 300
City-St-Zip: BOCA RATON, FL 33486 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEVINE, BARBARA
Address: 2220 SUN CLIFFS STREET
City-St-Zip: LAS VEGAS, NV 89134 US

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: BARBARA BROXMEYER TD 04/26/2007
Electronic Signature of Signing Officer or Director Date