2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

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Entity Name: SOUTH FLORIDA HEALTH INFORMATION MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

19685 NW 62 COURT
HIALEAH, FL 33015

New Principal Place of Business:

Current Mailing Address:

19685 NW 62 COURT
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 65-0429129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CASTILLO, IVETTE
19685 NW 62 COURT
HIALEAH, FL 33015 US

Name and Address of New Registered Agent:

CASTILLO, IVETTE
19685 NW 62ND COURT
HIALEAH, FL 33015 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: IVETTE M. CASTILLO 04/30/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BEAVERS, ROBERTA
Address: 2727 PINEWOOD CT
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: P ( ) Delete
Name: FINKELSTEIN, JILL
Address: 5020 PEBBLEBROOK WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: PE ( ) Delete
Name: CASTILLO, IVETTE M
Address: 19685 NW 62 CT
City-St-Zip: HIALEAH, FL 33015

Title: S ( ) Delete
Name: TORZEWSKI, SUSAN O
Address: 5900 SW 39TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33314

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CASTILLO, IVETTE M
Address: 19585 N.W. 62ND COURT
City-St-Zip: MIAMI, FL 33015

Title: PE (X) Change ( ) Addition
Name: MORALES, MARY JO
Address: 2871 S.W. 176TH TERRACE
City-St-Zip: MIRAMAR, FL 33021

Title: D (X) Change ( ) Addition
Name: MUNTANER, MAYRA
Address: 10751 S.W. 105TH AVENUE
City-St-Zip: MIAMI, FL 33176

Title: D (X) Change ( ) Addition
Name: WORSLEY, MARY
Address: 15755 S.W. 297TH TERRACE
City-St-Zip: HOMESTEAD, FL 33033

Title: T ( ) Change (X) Addition
Name: TORZEWSKI, SUSAN
Address: 5900 S.W. 39TH STREET
City-St-Zip: DAVIE, FL 33314

Title: S ( ) Change (X) Addition
Name: CRUZ, INEZ
Address: 4021 S.W. 132ND AVENUE
City-St-Zip: MIAMI, FL 33175

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: IVETTE M. CASTILLO P 04/30/2006
Electronic Signature of Signing Officer or Director Date