

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 23, 2009
Secretary of State

DOCUMENT# N93000002528

Entity Name: CEDARS AUXILIARY, INC.

Current Principal Place of Business:

1400 NW 12TH AVE
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

1400 NW 12TH AVE
MIAMI, FL 33136

New Mailing Address:

FEI Number: 65-0415064 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ARONSON, DAVID A
1000 NE 176TH STREET
NORTH MIAMI BEACH, FL 33162 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: PD () Delete
Name: ROGOWSKI, CRAIG
Address: 10545 SOUTH DIXIE HIGHWAY
City-St-Zip: PINECREST, FL 33156

Title: VD () Delete
Name: TALBOY, DENISE
Address: 4700 SHERIDAN STREET, SUITE P
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD () Delete
Name: KEARIN, TACEY
Address: 11570 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: SD () Delete
Name: FINK, GARY
Address: 2170 NE 5TH CIRCLE
City-St-Zip: BOCA RATON, FL 33431

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TALBOY, DENISE
Address: 4700 SHERIDAN STREET, UNIT P
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD (X) Change () Addition
Name: FINK, GARY
Address: 8785 SW 58TH STREET
City-St-Zip: COOPER CITY, FL 33328

Title: STD (X) Change () Addition
Name: KEARIN, TACEY
Address: 9920 SW 60TH STREET
City-St-Zip: MIAMI, FL 33173

Title: D (X) Change () Addition
Name: POWELL, CHARLOTTE
Address: 3400 SW 27TH AVENUE, UNIT 703
City-St-Zip: MIAMI, FL 33173

Title: D () Change (X) Addition
Name: GLOVER, LOTTE
Address: 42 SAMANA DRIVE
City-St-Zip: CORAL GABLES, FL 33133

Title: D () Change (X) Addition
Name: LEITNER, GRACE
Address: 100 LINCON ROAD, PH9
City-St-Zip: MIAMI BEACH, FL 33139

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: DENISE TALBOY

PRES

09/23/2009

Electronic Signature of Signing Officer or Director

_____ Date