

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003503

FILED
Apr 26, 2009
Secretary of State

Entity Name: JUDICIAL EQUALITY FOUNDATION, INCORPORATED

Current Principal Place of Business:

915 NW 1ST AVENUE
SUITE H907
MIAMI, FL 33136 US

Current Mailing Address:

915 NW 1ST AVENUE
SUITE H907
MIAMI, FL 33136 US

New Principal Place of Business:

36 NW 6TH AVENUE
SUITE 409
MIAMI, FL 33128 US

New Mailing Address:

36 NW 6TH AVENUE
SUITE 409
MIAMI, FL 33128 US

FEI Number: 65-0430404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, WILLIAM S ESQ
915 NW 1ST AVENUE
SUITE H907
MIAMI, FL 33136 US

Name and Address of New Registered Agent:

SCOTT, WILLIAM S ESQ
36 NW 6TH AVENUE
SUITE 409
MIAMI, FL 33128 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: WILLIAM S. SCOTT

04/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCOTT, WILLIAM S
Address: 915 NW 1ST AVENUE - SUITE H 907
City-St-Zip: MIAMI, FL 33136 US

Title: DAA () Delete
Name: BLIKRE, JARED
Address: 12841 S.W. 74TH STREET
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: MASH, PATRICIA C
Address: 940 NE 79TH STREET, SUITE A
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: GONZALES, ARTURO
Address: 940 NE 79TH STREET, SUITE A
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: LECRONE, PATRICIA D
Address: 940 NE 79TH STREET, SUITE A
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCOTT, WILLIAM S
Address: 36 NW 6TH AVE, SUITE 409
City-St-Zip: MIAMI, FL 33128 US

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

Title: D (X) Change () Addition
Name: MASH, PATRICIA C
Address: 36 NW 6TH AVENUE - 409
City-St-Zip: MIAMI, FL 33128

Title: D (X) Change () Addition
Name: GONZALES, ARTURO
Address: 36 NW 6TH AVENUE - SUITE 409
City-St-Zip: MIAMI, FL 33128

Title: D (X) Change () Addition
Name: LECRONE, PATRICIA D
Address: 36 NW 6TH AVENUE - SUITE 409
City-St-Zip: MIAMI, FL 33128

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: WILLIAM S. SCOTT

EX D

04/26/2009

Electronic Signature of Signing Officer or Director

Date