

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000107

FILED  
May 01, 2008  
Secretary of State

Entity Name: FAMILIES IN DISTRESS, INC.

## Current Principal Place of Business:

1200 NW 13TH ST.  
#102E  
BOCA RATON, FL 33486 US

## New Principal Place of Business:

## Current Mailing Address:

1200 NW 13TH ST.  
#102E  
BOCA RATON, FL 33486 US

## New Mailing Address:

FEI Number: 65-0546067      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:

## Name and Address of New Registered Agent:

CRUZ, MILAGROS  
1200 NW 13TH ST.  
#102E  
BOCA RATON, FL 33486 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BLAZAR, MARC W  
Address: 6743 NEW PORT LAKE CIR  
City-St-Zip: BOCA RATON, FL 33496

Title: D ( ) Delete  
Name: CRUZ, MILAGROS  
Address: 1200 NW 13TH ST. #102E  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: BURTON, DANIEL  
Address: 1200 NW 13TH ST. #102E  
City-St-Zip: BOCA RATON, FL 33486

## 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:

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: DANIEL BURTON

DIR

05/01/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date