

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000946

FILED
Mar 22, 2005
Secretary of State

Entity Name: BIG BROTHERS/BIG SISTERS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

2112 S CONGRESS AVE.
#200
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

2112 S CONGRESS AVE.
#200
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 65-0639541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSKIN, LEON
2112 S CONGRESS AVE.
STE. 200
FORT MYERSES, FL 33901 US

Name and Address of New Registered Agent:

MUSKIN, LEON
2112 S CONGRESS AVE.
STE. 200
WEST PALM BEACH, FL 33406 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: LEON MUSKIN

03/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MUNIZ, LYDIA
Address: 701 SW 27TH AVE., STE. 800
City-St-Zip: MIAMI, FL 33135

Title: TD () Delete
Name: MUSKIN, LEON
Address: 2112 S CONGRESS AVE., STE. 200
City-St-Zip: WEST PALM BEACH, FL 33406

Title: SD () Delete
Name: BROILES, JANET
Address: 1155 NW 13TH ST.
City-St-Zip: GAINESVILLE, FL 32601

Title: VPD () Delete
Name: SAINT-SUMMER, JUDITH
Address: 1943 MARAVILLA AVE
City-St-Zip: FORT MYERSES, FL 33901

Title: D () Delete
Name: MILLER, JUDI
Address: 4131 S. US 1 BLDG 2#4
City-St-Zip: FT. PIERCE, FL 33041

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: BROILES, JANET
Address: 1155 NW 13TH ST.
City-St-Zip: GAINESVILLE, FL 32601

Title: VPD (X) Change () Addition
Name: SAINT-SUMMER, JUDITH
Address: 1943 MARAVILLA AVE
City-St-Zip: FORT MYERS, FL 33901

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEON MUSKIN

TD

03/22/2005

Electronic Signature of Signing Officer or Director

Date