2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005313

FILED Feb 15, 2006 Secretary of State

Entity Name: ASSOCIATION FOR DISABLED AMERICANS, INC.

Current Principal Place of Business: New Principal Place of Business:

6538 COLLINS AVE., PMB #196 MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

6538 COLLINS AVE., PMB #196 MIAMI BEACH, FL 33141

FEI Number: 65-0646620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUIZ, DANIEL

16041 SW 86TH AVE.

MIAMI, FL 33157 US

WISNIEWSKI, P. MICHELLE

1008 CALICO JACK CIRCLE

CUDJOE KEY, FL 33042 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: P. MICHELLE WISNIEWSKI 02/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 RUIZ, DANIEL
 Name:
 WISNIEWSKI, P. MICHELLE

 Address:
 16041 SW 86TH AVE.
 Address:
 1008 CALICO JACK CIRCLE

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:
 CUDJOE KEY, FL 33042

Title: VD () Delete Title: VD (X) Change () Addition Name: RUIZ, DANIEL VD (X) Change () Addition

 Address:
 16041 SW 86TH AVE.
 Address:
 104 LINDEN ST.

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:
 RUSSELVILLE, AL 35653

Title: SD () Delete Title: SD (X) Change () Addition Name: PRICE, CHERYL Name: WISNIEWSKI, ANNA

Address: 1111 BRICKELL BAY DR #1801 Address: 1008 CALICO JACK CIRCLE City-St-Zip: MIAMI, FL 33131 City-St-Zip: CUDJOE KEY, FL 33042

Title: D () Delete Title: () Change () Addition

 Name:
 JAFFER, ADAH
 Name:

 Address:
 2901 S. BAYSHORE DR., #6F
 Address:

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:

Name: WISNIEWSKI, MICHJELLE Name: FELDSTEIN, DON

 Address:
 1008 CALICO JACK CIRCLE
 Address:
 2715 TIGERTALE AVE. #108

 City-St-Zip:
 CUDJOE KEY, FL 33042
 City-St-Zip:
 MIAMI, FL 33131

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: P. MICHELLE WISNIEWSKI PD 02/15/2006