

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005889

FILED  
Jan 09, 2010  
Secretary of State

**Entity Name:** TEJADA FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

6880 SW 132 ST.  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

6880 SW 132 ST.  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** 65-0634239

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TEJADA, FRANCISCO  
6880 SW 132 STREET  
MIAMI, FL 331567819 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: D  
Name: TEJADA, JAMES F  
Address: 7623 BISCAYNE BLVD. APARTMENT # 15  
City-St-Zip: MIAMI, FL 33138

Title: D  
Name: TEJADA, BARBARA A  
Address: 6880 SW 132 ST.  
City-St-Zip: MIAMI, FL 33156

Title: D  
Name: FRANK, ANA M  
Address: 8231 SW 170 TERR  
City-St-Zip: MIAMI, FL 33157

Title: D  
Name: TROTTO, SEMIRAMIS  
Address: 142 HARRISON AVE  
City-St-Zip: WESTFIELD, NJ 07090

Title: D  
Name: TEJADA, BARBARA L  
Address: 324 EAST 9TH STREET. APARTMENT # 22  
City-St-Zip: NEW YORK CITY, NY 10003

Title: D  
Name: TEJADA, FRANCISCO PHD  
Address: 8604 FOWLER AVENUE  
City-St-Zip: PARKVILLE, MD 21234

I hereby 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 all other like empowered.

SIGNATURE: FRANCISCO TEJADA MD

D

01/09/2010

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

\_\_\_\_\_  
Date