

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002046

FILED
Jan 25, 2006
Secretary of State

Entity Name: R.E.A.C.H. FOR SPIRITUAL AWAKENING INC.

Current Principal Place of Business:

3220 SW 50TH TERRACE
FT LAUDERDALE, FL 33314

New Principal Place of Business:

90 SOUTH CORTEZ
MARGATE, FL 33068 US

Current Mailing Address:

3220 SW 50TH TERRACE
FT LAUDERDALE, FL 33314

New Mailing Address:

90 SOUTH CORTEZ
MARGATE, FL 33068 US

FEI Number: 65-0910938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAW OFFICE OF CHRISTOPHER A NARDUCCI, P.A.
1975 E SUNRISE BLVD
SUITE 821
FT LAUDERDALE, FL 33304 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: PD () Delete
Name: REVEREND SCHOSHANA/S, USAN LEVY
Address: 3220 SW 50TH TERRACE
City-St-Zip: FT LAUDERDALE, FL 33314

Title: VP () Delete
Name: LEVY, JOSEPH
Address: 429 RYESIDE AVENUE
City-St-Zip: NEW MILFORD, NJ 07646

Title: VPD () Delete
Name: GOMEZ, ROBERT
Address: W 55 N 217 WOODMERE CRT #2
City-St-Zip: CEDARBURG, WI 53012

Title: T () Delete
Name: CORGOSINHO, PAULA
Address: 3220 SW 50TH TERRACE
City-St-Zip: DAVIE, FL 33314

Title: S () Delete
Name: ADOLFI, ANTHONY
Address: 490 NW 20TH ST #105-A
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REVEREND SCHOSHANA/S, USAN LEVY
Address: 90 SOUTH CORTEZ
City-St-Zip: MARGATE, FL 33068 US

Title: VP (X) Change () Addition
Name: LEVY, JOSEPH
Address: 20 TRAIL OF THE MAPLES
City-St-Zip: PUTNAM VALLEY, NY 10579 US

Title: VPD (X) Change () Addition
Name: GOMEZ, ROBERT
Address: W 160 N 9619 COLONIAL DRIVE
City-St-Zip: GERMANTOWN, WI 53022 US

Title: T (X) Change () Addition
Name: CORGOSINHO, PAULA
Address: 1635 MOFFETT STREET-REAR
City-St-Zip: HOLLYWOOD, FL 33020 US

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 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: REVEREND SCHOSHANA/SUSAN LEVY

PD

01/25/2006

Electronic Signature of Signing Officer or Director

Date