

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002700

FILED  
May 07, 2009  
Secretary of State

**Entity Name:** NEIGHBORS AND NEIGHBORS ASSOCIATION, INC.

**Current Principal Place of Business:**

176 NW 62 ST  
STE 3  
MIAMI, FL 33150

**New Principal Place of Business:**

**Current Mailing Address:**

180 NW 62 ST  
#1  
MIAMI, FL 33150

**New Mailing Address:**

**FEI Number:** 65-0675186      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

JOHNSON, MORRIS DR  
180 NW 62ND STREET  
MIAMI, FL 33150 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: P ( ) Delete  
Name: JOHNSON, MORRIS DR.  
Address: 1040 NW 57TH STREET  
City-St-Zip: MIAMI, FL 33150

Title: S ( ) Delete  
Name: LEFLORE, TERESA  
Address: 180 NW 62ND ST  
City-St-Zip: MIAMI, FL 33150

Title: T ( ) Delete  
Name: CANNON-EL, GREGG  
Address: 180 NW 62 STREET  
City-St-Zip: MIAMI, FL 33105

Title: VP ( ) Delete  
Name: STRINGER, CHARLES  
Address: 3555 NW 96TH STREET  
City-St-Zip: MIAMI, FL 33147

Title: OFF ( ) Delete  
Name: MARGO, BRONSON  
Address: 180 NW 62 STREET  
City-St-Zip: MIAMI, FL 33150

**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:

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: CHARLES STRINGER

VP

05/07/2009

Electronic Signature of Signing Officer or Director

Date