

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003266

FILED  
May 16, 2009  
Secretary of State

Entity Name: SPIRIT OF GIVING NETWORK, INC.

## Current Principal Place of Business:

C/O CHRIS ROOT  
951 YAMATO RD, STE 200W  
BOCA RATON, FL 33431

## New Principal Place of Business:

## Current Mailing Address:

C/O CHRIS ROOT  
951 YAMATO RD, STE 200W  
BOCA RATON, FL 33431

## New Mailing Address:

FEI Number: 65-0765570      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

## Name and Address of New Registered Agent:

BDB AGENT CO.  
5355 TOWN CENTER RD, SUITE 900  
BOCA RATON, FL 33486      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: D      (X) Delete  
Name: MILLER, WILLIAM  
Address: 235 SE 5 AVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D      (X) Delete  
Name: WEINSTOCK, JEFF  
Address: 5355 TOWN CENTER RD. STE. 900  
City-St-Zip: BOCA RATON, FL 33486

Title: TDP      ( ) Delete  
Name: ROOT, CHRISTOPHER  
Address: 399 NW BOCA RATON BLVD.  
City-St-Zip: BOCA RATON, FL 33432

Title: VP      ( ) Delete  
Name: DEVITA, JOYCE  
Address: 1220 COCOANUT RD  
City-St-Zip: BOCA RATON, FL 33432

Title: S      ( ) Delete  
Name: WALEN, YOSHIMI  
Address: 3998 NW 17 TERE.  
City-St-Zip: BOCA RATON, FL 33434

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PRES      (X) Change ( ) Addition  
Name: ROOT, CHRISTOPHER  
Address: 951 YAMATO RD, STE 200W  
City-St-Zip: BOCA RATON, FL 33431

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

Title: TRES      (X) Change ( ) Addition  
Name: RUBIN, NOAH  
Address: 1424 W WICKHAM CIRCLE C  
City-St-Zip: DELRAY BEACH, FL 33445

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: NOAH RUBIN

TRES

05/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date