

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001149

FILED
Apr 20, 2009
Secretary of State

Entity Name: PINEY GROVE HUMAN SERVICES CORPORATION, INC.

Current Principal Place of Business:

4699 W. OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33313

New Principal Place of Business:

Current Mailing Address:

4699 W. OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33313 US

New Mailing Address:

FEI Number: 65-0813429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, GWENDOLYN
4699 W. OAKLAND PARK BLVD.
LAUDERDALE LAKES, FL 33313 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: CRAWFORD, CARL M
Address: 2737 NW 24TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: VD () Delete
Name: PERRY, ROBERT L REV.
Address: 8708 ESCONDIDO WAY, EAST
City-St-Zip: BOCA RATON, FL 33433

Title: S () Delete
Name: ADAMS, GWENDOLYN
Address: 3340 NW 7TH COURT
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: S () Delete
Name: CLARK, ANNIE ASST
Address: 920 NW 38TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D () Delete
Name: BOWEN, DEBORAH
Address: 2972 NW 33RD LN
City-St-Zip: LAUDERDALE LAKES, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: LEVERRETT, LARRY
Address: 650 SW 14 STREET
City-St-Zip: DEERFIELD, FL 33441

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

Title: SEC (X) Change () Addition
Name: CAMPBELL, LESLIE ASST
Address: 3979 NW 73 WAY
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D (X) Change () Addition
Name: ROBINSON, ASHLEY
Address: 4940 NW 88 LANE
City-St-Zip: CORAL SPRINGS, FL 33067

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: GWENDOLYN ADAMS

SEC

04/20/2009

Electronic Signature of Signing Officer or Director

Date