2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001659

WESTERN SPRINGS, IL 60558

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Entity Nan	ne: HAYDN S	OCIETY OF I	FLORIDA INC.						
Current Principal Place of Business:				New Princ	New Principal Place of Business:				
732 NW 29 WILTON M	STREET ANORS, FL 3:	3311							
Current Ma	ailing Address	s:		New Mailii	New Mailing Address:				
732 NW 29 WILTON M	STREET ANORS, FL 33	3311 US							
FEI Number:	65-0826995	FEI Number	Applied For ()	FEI Number Not Appli	cable ()	Certifica	te of Status Desi	red ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:				
732 NW 29	DN, STEVEN STREET ANORS, FL 3:		732 NW 29	SIGURDSON, WENDY R 732 NW 29 STREET WILTON MANORS, FL 33311 US					
The above in the State		ubmits this s	atement for the pu	rpose of changing it	s registered	l office or re	egistered agen	t, or both,	
SIGNATUR	RE: WENDY R	GURDSON		04/30/2007					
	Electroni	c Signature o	of Registered Ager	t		I	Date		
OFFICERS	AND DIRECT		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					
Title: Name: Address: City-St-Zip:	CD () BERG, ROBIN 4500 SEA GRAF LAUDERDALE-B		. 33308	Title: Name: Address: City-St-Zip:		()Change() Addition		
Title: Name: Address: City-St-Zip:	D () FROMMER, ROZ 2001 NE 191 DE NORTH MIAMI B	IVE	79	Title: Name: Address: City-St-Zip:	D ZENIL, MARI 313 NE 2 AV FORT LAUDE	ENUE			
Title: Name: Address: City-St-Zip:	D () ALTMAN, HARRI 4930 SABAL PA TAMARAC, FL 3	_M BLVD #401		Title: Name: Address: City-St-Zip:		()Change() Addition		
Title: Name: Address:	D (X) SIGURDSON, GA 4561 LAWN AVE			Title: Name: Address:		()Change() Addition		

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.

City-St-Zip:

SIGNATURE: MARIA ZENIL 04/30/2007 D