2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2009
Secretary of State

DOCUMENT# N99000003429

Entity Name: SOUTH FLORIDA GUARDIANSHIP ASSOCIATION, INC.

Current Principal Place of Business:

SOUTH FLORIDA GUARDIANSHIP ASSOCIATION
767 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

SOUTH FLORIDA GUARDIANSHIP ASSOCIATION
767 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 65-1096154 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERTZ, STEPHEN G
767 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 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:	HERTZ, JACQUELINE PRES	
Address:	767 ARTHUR GODFREY ROAD	
City-St-Zip:	MIAMI BEACH, FL 33140 US	
Title:	PPD	( ) Delete
Name:	ABEL-REISER, BARBARA PPD	
Address:	1607 PONCE DE LEON BOULEVARD	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	D	( ) Delete
Name:	MICHAEL, MESSER	
Address:	5555 BISCAYNE BOULEVARD	
City-St-Zip:	MIAMI, FL 33137	
Title:	TD	( ) Delete
Name:	TURNER, WENDY TREAS	
Address:	11701 S.W. 57 COURT	
City-St-Zip:	CORAL GABLES, FL 33156	
Title:	SD	( ) Delete
Name:	HERTZ, STEPHEN G SEC	
Address:	767 ARTHUR GODFREY ROAD	
City-St-Zip:	MIAMI BEACH, FL 33140 US	
Title:	D	( ) Delete
Name:	COOPER, BONNIE L PRES-E	
Address:	50 W. MASHTA DRIVE, SUITE 4	
City-St-Zip:	KEY BISCAYNE, FL 33149	

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:	
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: JACQUELINE S. HERTZ PRES 03/29/2009

Electronic Signature of Signing Officer or Director — Date