


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N99000003722</b> 1. Entity Name <b>FRIENDS OF CHILDREN UNITED SUCCEED, INC.</b>	
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Principal Place of Business <b>6800 W. COMMERCIAL BLVD.,STE.4 ATTN: LEE RECHTER LAUDERHILL, FL US</b>	Mailing Address <b>6800 W. COMMERCIAL BLVD.,STE.4 ATTN: LEE RECHTER LAUDERHILL, FL US</b>
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**DO NOT WRITE IN THIS SPACE**



02092008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>65-0927345</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**RECHTER, LEE  
6800 W COMMERCIAL BLVD  
SUITE 4  
LAUDERHILL, FL**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	EX-D RECHTER, LEE 6800 W. COMMERCIAL BLVD FORT LAUDERDALE, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STEARN, JESS DR. 6800 W. COMMERCIAL BLVD. FORT LAUDERDALE, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROOKS, CHRSTINE DR. 1834 BELMONT RD. NW WASHINGTON, DC 20229
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEIMARK, CORT ESQ. 100 S.E. 3RD AVE STE 1100 FORT LAUDERDALE, FL 33394
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OGDEN, SUSAN 1310 AVE CORUNA GABLES BY THE SEA CORAL GABLES, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RECHTER, MARVIN DR. 9591 PARK LANE PLANTATION, FL 33324

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U00000838578  
03/05/08-80037-006 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Lee Rechter 2/16/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #