

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004811

FILED
Feb 06, 2006
Secretary of State

Entity Name: DIGNITY / FT. LAUDERDALE, INC.

Current Principal Place of Business:

740 SOUTH FEDERAL HWY
APT 609
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

PO BOX 22884
FORT LAUDERDALE, FL 33335

New Mailing Address:

FEI Number: 65-0952632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 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: YORIO, VICTOR
Address: 3300 N STATE ROAD 7
City-St-Zip: HOLLYWOOD, FL 33021

Title: V () Delete
Name: ROGERS, RICHARD
Address: 3000 EAST SUNRISE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: T () Delete
Name: SULLIVAN, MARY
Address: 3000 EAST SUNRISE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S () Delete
Name: PETZING, WILLIAM
Address: 3000 EAST SUNRISE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: CAPUTO, NICK
Address: 1421 S OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: SMITH, CHARLES
Address: 3300 N STATE ROAD 7
City-St-Zip: HOLLYWOOD, FL 33021

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY SULLIVAN

T

02/06/2006

Electronic Signature of Signing Officer or Director

Date