

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006104

FILED
Jan 13, 2009
Secretary of State

Entity Name: SUICIDE PREVENTION ADVOCACY NETWORK FLORIDA, INC.

Current Principal Place of Business:

2725 TWIN OAKS TRAIL
FORT PIERCE, FL 34945

New Principal Place of Business:

Current Mailing Address:

2725 TWIN OAKS TRAIL
FORT PIERCE, FL 34945

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLINARO, BRENDA
2725 TWIN OAKS TRAIL
FORT PIERCE, FL 34945 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: PTD () Delete
Name: MOLINARO, BRENDA
Address: 2725 TWIN OAKS TRAIL
City-St-Zip: FORT PIERCE, FL 34945

Title: VD () Delete
Name: SCOORES, PAT
Address: 5020 TAMAIMMI TRAIL N
City-St-Zip: NAPLES, FL 34102

Title: SD () Delete
Name: BOUSQUET, JUDY
Address: 2240 NW.14 AVE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MOLINARO, BRENDA
Address: 2725 TWIN OAKS TRAIL
City-St-Zip: FORT PIERCE, FL 34945

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: BRENDA MOLINARO

PD

01/13/2009

Electronic Signature of Signing Officer or Director

Date