

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000056212

**FILED**  
**Jul 23, 2009**  
**Secretary of State**

**Entity Name:** ACT OF KINDNESS PROPERTIES, INC.

**Current Principal Place of Business:**

2631 NW 24TH STREET  
FORT LAUDERDALE, FL 33311

**New Principal Place of Business:**

170 NW 31 AVENUE  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

2631 NW 24TH STREET  
FORT LAUDERDALE, FL 33311

**New Mailing Address:**

170 NW 31 AVENUE  
FORT LAUDERDALE, FL 33311

**FEI Number:** 51-0580271

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**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: DPST ( ) Delete  
Name: SMOOT, MARGIE  
Address: 2631 NW 24TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: DV ( ) Delete  
Name: SMOOT, MICHAEL  
Address: 2631 NW 24TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: SMOOT, MICHAEL  
Address: 170 NW 31 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: DV (X) Change ( ) Addition  
Name: SMOOT, MICHAEL  
Address: 170 NW 31 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33311

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGIE SMOOT RESIGNING OFFICER

DPST

07/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date