

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000015140

FILED
Feb 01, 2012
Secretary of State

Entity Name: FAMILY FOCUSED MEDIATION, INC.

Current Principal Place of Business:

500 WEST CYPRESS CREEK ROAD
SUITE 440
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

500 WEST CYPRESS CREEK ROAD
SUITE 440
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 27-5233889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANE, EVAN J
500 WEST CYPRESS CREEK ROAD
SUITE 440
FORT LAUDERDALE, FL 33309 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
Name: SHANE, JENNY L
Address: 500 WEST CYPRESS CREEK ROAD, SUITE 440
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: VP
Name: SHANE, JENNY L
Address: 500 WEST CYPRESS CREEK ROAD, SUITE 440
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: S
Name: SHANE, JENNY L
Address: 500 WEST CYPRESS CREEK ROAD, SUITE 440
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: T
Name: SHANE, JENNY L
Address: 500 WEST CYPRESS CREEK ROAD, SUITE 440
City-St-Zip: FORT LAUDERDALE, FL 33309 US

I hereby 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 all other like empowered.

SIGNATURE: JENNY L SHANE

P

02/01/2012

Electronic Signature of Signing Officer or Director

Date