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

TREASURER

SIGNATURE: STEPHEN GOLDSTEIN

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail :**

Title	PRESIDENT	Title	TREASURER
Name	HARVEY, NUGENE	Name	GOLDSTEIN, STEPHEN
Address	15231 N.W. 6TH COURT	Address	2769 MEADOWOOD DRIVE
City-State-Zip:	PEMBROKE PINES FL 33028	City-State-Zip:	WESTON FL 33332
Title	SECRETARY	Title	VP
Title Name	SECRETARY CASEY, MARY BETH	Title Name	VP HUARD, MARK

Electronic Signature of 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.

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

### **Current Principal Place of Business:**

**304 INDIAN TRACE** #130 WESTON, FL 33326

#### **Current Mailing Address:**

**304 INDIAN TRACE** #130 WESTON, FL 33326

#### FEI Number: 74-3091542

### Name and Address of Current Registered Agent:

SADOFF, FRED R 2500 WESTON ROAD, STE 311 WESTON, FL 33331 US

Certificate of Status Desired: No

01/09/2014

Date