

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51340

Entity Name: NEIGHBORS 4 NEIGHBORS, INC.**Current Principal Place of Business:**C/O WFOR TV
8900 N.W. 18TH TERRACE
MIAMI, FL 33172**Current Mailing Address:**C/O WFOR TV
8900 N.W. 18TH TERRACE
MIAMI, FL 33172 US**FEI Number:** 65-0364391**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CAMERON, LYNNE ED
8900 N.W. 18TH TERRACE
MIAMI, FL 33172 US*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

Officer/Director Detail :

Title	PRESIDENT
Name	MICHAEL, GOODMAN
Address	4100 NE 15 TERRACE
City-State-Zip:	FT LAUDERDALE FL 33334

Title	VP
Name	BOOK, RONALD
Address	18851 NE 29 AVENUE
City-State-Zip:	AVENTURA FL 33180

Title	SECRETARY
Name	LAZEGA, RUSSEL
Address	3467 NE 168 STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33160

Title	DIRECTOR
Name	DORSAINVIL, DOMINIQUE
Address	14420 SW 143 CT
City-State-Zip:	MIAMI FL 33186

Title	DIRECTOR
Name	PASTOR, STEFAN
Address	515 E. LAS OLAS BOULEVARD, 15TH FLOOR
City-State-Zip:	FT LAUDERDALE FL 33301

Title	TREASURER
Name	WELSCH, IAN
Address	2103 CORAL WAY 2ND FLOOR
City-State-Zip:	MIAMI FL 33145

Title	DIRECTOR
Name	NEPOLA, JUSTIN
Address	4000 HOLLYWOOD BLVD 765 S
City-State-Zip:	HOLLYWOOD FL 33021

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.

SIGNATURE: IAN WELSCH**TREASURER****04/12/2019**

Electronic Signature of Signing Officer/Director Detail

Date