## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**

## **DOCUMENT # 715290**

1. Entity Name

## EDISON CENTER INTERNATIONAL FREE AND ACCEPTED MO

6. Name and Address of Current Registered Agent



Secretary of State 02-28-2003 90173 004 \*\*\*\*61.25

FILED

DERN MASONS AND EASTERN STARS, INCORPORATED

Principal Place of Business Mailing Address 5598 N W 7TH AVE 3011 N.W. 171ST STREET MIAMI FL 33127 MIAMI FL 33056 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country

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☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 23-0809780 Applied For Not Applicable

5. Certificate of Status Desired 7. Name and Address of New Registered Agent

\$8.75 Additional Fee Required

SIMMONS, FRANCES 3125 N W 42ND STREET MIAMI FL 33142

Street Address (P.O. Box Number is Not Acceptable)

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Name

DATE

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

\*\* FILE NOW: FEE IS \$61.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change ☐ Addition HAMILTON, THOMAS H. NAME NAME STREET ADDRESS |3011 NW 171ST STREET STREET ADDRESS CITY-ST-7IP **MIAM! FL 33055** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition DAVIS, S. T. NAME NAME STREET ADDRESS 9111 LITTLE RIVER BLVD STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TIT! F Change ☐ Addition MINCY, CHARLIE M. NAME NAME STREET ADDRESS 20931 N.W. 34TH COURT STREET ADDRESS CITY-ST-7IP CAROL CITY FL 33055 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PITTS, MINNETTE E NAME 3720 S.W. 52ND AVENUE #107 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PARK FL 33023 CITY-ST-7/P □ Delete TITLE ☐ Change ☐ Addition NELSON, RONALD NAME NAME STREET ADDRESS P. O. BOX 552330 N/A STREET ADDRESS CITY-ST-ZIP CAROL CITY FL 33055 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition SIMMONS, FRANCES NAME NAME STREET ADDRESS 3125 N.W. 42ND STREET STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

CITY-ST-ZIP

MIAMI FL 33142