## 2003 NOT-FOR-PROFIT CORPORATION

## FILED Apr 07, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # 716445 1. Entity Name 04-07-2003 90942 040 \*\*\*\*61.25 MOUNT OLIVE GARDENS NO.1, INC. Principal Place of Business Mailing Address 4360 W. OAKLAND PK BLVD. 4360 W. OAKLAND PK. LAUDERDALE LAKES FL 33313 LAUDERDALE LAKES FL 33313 2. Principal Place of Business 3. Mailing Address 1701 NW 6th CT Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 1 - 1014. FEI Number 59-1403029 City & State City & State FT LAUDERDALE Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired П BROWARD 33311 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

MIAMI FL 33102 8. The above named entity submitted his 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

, typed or printed name of registered agent and title it applicable

FILE NOW: FEE IS \$61.25

ROULHAC, JULIET M

the obligations of registered

SIGNATURE

9250 W FLAGLER STREET ROOM 6500

9. Election Campaign Financing

Trust Fund Contribution.

(NOTE: Registered Agent signature required when reinstating)

City

AVOLENE CHANGE

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

\$5.00 May Be

Added to Fees

<u>7482 NW 48th PLACE</u>

Make Check Payable to Florida Department of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS ŧρ. 11. Addition TITLE ☐ Delete TITLE Change DIRECTOR ROUHLAC, JULIET NAME NAME JULIET ROUHLAC SUBJECT ADDRESS 9250 W FLAGILER STREET ROOM 6500 STREET ADDRESS 9250 W FLAGER STREET ROOM 6500 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33102** MIAMI, FL 33102 ▼ Change Addition TITLE ☐ Delete TITLE ROYSTER, AVOLENE NAME NAME AVOLENE CHANGE 7482 NW 84TH PLACE STREET ADDRESS STREET ADDRESS 7482 NW 48th PLACE CITY-ST-ZIP- -LAUDERHILL FL 33319 ----CITY-ST-ZIP. LAUDERHILL, FL-33319== TITLE ☐ Delete TITLE DIRECTOR Change ★ Addition DOROTHEA P PAYTON NAME NAME JAMES HOUSTON 443 NE 210 CIR TERR 102 STREET ADDRESS STREET ADDRESS 1715 NW 162nd AVENUE CITY-ST-ZIP MIAMI FL CITY-ST-ZIP PEMBROKE PINES, FL 33028 ☐ Delete TITLE Change ☐ Addition DIXION. CASTELLA NAME NAME STREET ADDRESS 750 NW 38TH AVENUE STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33311 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MANN, LOUISE NAME NAME STREET ADDRESS 3610 NW 9TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33311 TITLE ☐ Delete ☐ Addition TITLE Change BARNES, NELLIE NAME NAME 310 SW 30TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-7IP FORT LAUDERDALE FL 33312 CITY-ST-ZIP

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 employered 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 any address, with all other like empowered.

SIGNATURE:

Applied For Not Applicable

Zip Code