

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90020 029 ****61.25

DOCUMENT # 744510

1. Entity Name

THE HASEY FOUNDATION, INC.



Principal Place of Business

1877 S FEDERAL HWY
SUITE 202
BOCA RATON FL 33432

Mailing Address

1877 S FEDERAL HWY
SUITE 202
BOCA RATON FL 33432

2. Principal Place of Business

same

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1851950

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HASEY, REGINA M
1877 S FEDERAL HWY SUITE 202
BOCA RATON FL 33432

Name

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

City

FL

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

Regina M Hasey
Regina M Hasey, President

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

HASEY, REGINA M
Registered Agent Signature (Typed or Printed Name)

DATE

1/28/04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☒ Delete
NAME HASEY, WILLIAM J.
STREET ADDRESS 200 COMPASS DRIVE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ Delete
NAME HASEY, REGINA M. *PRESIDENT*
STREET ADDRESS 200 COMPASS DRIVE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ Delete
NAME HASEY, MARTIN J.
STREET ADDRESS 42 N SWINTON AVE, STE 2
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE ☐ Delete
NAME SEYDEL, CATHERINE L
STREET ADDRESS 4074 WINTerset LANE
CITY-ST-ZIP WEST BLOOMFIELD MI

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE *PRESIDENT* ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

Regina M Hasey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/28/04