2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State
02-05-2002 90017 016 ****75.00

DOCUMENT # 755578

1. Entity Name

COALITION OF FLORIDA FARMWORKER ORGANIZATIONS, I NCORPORATED

Principal Place of Business	Mailing Address
305 S. FLAGLER AVENUE HOMESTEAD FL 33030 US	P O BOX 900368 HOMESTEAD FL 33090-0368 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
778 W.PALM DR.	P.O BOX 344010
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FLORIDA CITY, FL	City & State: FLORIDA CITY, FL
Zip: 33034 Country: U.S.A.	Zip: 33034 Country: U.S.A.

4. FEI Number: 59-2149950 ☐ 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
LOPEZ, ARTURO 305 S. FLAGLER AVENUE HOMESTEAD FL 33030	Name: ARTURO LOPEZ Street Address (P.O. Box Number is Not Acceptable): 778 W. PALM DR. City: FLORIDA CITY FL Zip Code: 33034

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.

SIGNATURE _____ ARTURO LOPEZ–EXECUTIVE DIRECTOR 01/10/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☒ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S THOMPSON, ROBERT 9975 MARLIN RD. MIAMI FL	☐ Delete	S THOMPSON, ROBERT 9975 MARLIN ROAD MIAMI, FL 33920	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTIN, JOANES 605 SW 6TH AVE HOMESTEAD FL 33030	☒ Delete	D SANCHEZ, SUSANA 1308 SOUTH PLUM STREET IMMOKALEE, FL 34142	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PRO, FERNANDO 20310 SW 106TH AVENUE MIAMI FL	☐ Delete	T PRO, FERNANDO 20310 SW 106TH AVENUE MIAMI, FL 33189	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C NAREZO, PEDRO 3747 SHAMROCK ST WEST TALLAHASSEE FL 32399	☐ Delete	C NAREZO, PEDRO 3747 SHAMROCK ST WEST TALLAHASSEE, FL 32303	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SERRATA, ESMERALDA 1800 FARMWOKER WAY IMMOKALEE FL 34142	☐ Delete	V/C SERRATA, ESMERALDA 1800 FARMWORKER WAY IMMOKALEE, FL 34142	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NAVA, LUPITA 2105 W. IMMOKALEE DR IMMOKALEE FL 34142	☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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 REQUIRED FERNANDO PRO, JR 01/15/02 (305) 238-0837

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #