
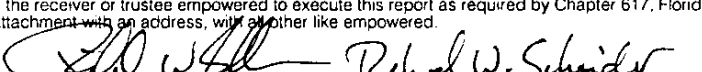


FILED
Mar 12, 2007 8:00 am
Secretary of State

40034000

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|--|--|---|---|--|--|
| DOCUMENT # 760583 | |  | | 03-12-2007 90080 047 ****61.25 | |
| 1. Entity Name WPBT COMMUNICATIONS FOUNDATION, INC. | | | | | |
| Principal Place of Business C/O RICHARD SCHNEIDER 14901 NE 20TH AVENUE N. MIAMI, FL 33181-1121 | | Mailing Address C/O RICHARD SCHNEIDER 14901 NE 20TH AVENUE N. MIAMI, FL 33181-1121 | | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 03022007 Chg-NP CR2E037 (12/06) | |
| City & State | | City & State | | 4. FEI Number 59-2141826 | |
| Zip | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent SCHNEIDER, RICHARD W 14901 NE 20TH AVE. MIAMI, FL 33181-1121 | | | | 7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2007 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | Make check payable to Florida Department of State | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | CD BERENS, FRED 3200 SE FINANCIAL CENTER MIAMI, FL | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | CD BERENS, FRED 200 S. BISCAYNE BLVD. MIAMI, FL | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P SCHNEIDER, RICHARD W 14901 NE 20TH AVE MIAMI, FL | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D HUSTON, EDWIN A 3600 NW 82ND AVE MIAMI, FL | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | D ELMORE, GEORGE 2101 S. CONGRESS AVE. DELRAY BEACH, FL 33445 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D YARDLEY, HERBERT 777 N SR 7 FORT LAUDERDALE, FL 33317 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | T CARROLL, SHIRLEY C 14901 NE 20TH AVE MIAMI, FL | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | D MENDOZA, CRISTINA L 11200 SW 8TH STREET, PC 511 MIAMI, FL 33199 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | S SOCIAS, PEGGY 14901 NE 20TH AVE MIAMI, FL | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  Richard W. Schneider 3/2/07 (305) 949-8321 | | | | | |