

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 04, 2003 8:00 am
Secretary of State

09-04-2003 90070 030 ****61.25

UBR001

DOCUMENT # F94000005841

1. Entity Name

INNOVATING WORTHY PROJECTS FOUNDATION, INC.



Principal Place of Business

**LAKEVIEW CORPORATE CENTER
6415 LAKE ROAD SUITE 208
GREENACRES CITY FL 33463**

Mailing Address

**LAKEVIEW CORPORATE CENTER
6415 LAKE ROAD SUITE 208
GREENACRES CITY FL 33463**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.,

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **22-6083636**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PACKER, ESTELLE
LAKEVIEW CORPORATE CENTER
6415 LAKE WORTH ROAD, SUITE 208
GREENACRES CITY FL 33463**

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

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
After September 10, 2003, min will be \$236.25**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PT	<input type="checkbox"/> Delete
NAME	WEISS, STEPHEN P	
STREET ADDRESS	2000 MARKET STREET, 10TH FL	
CITY-ST-ZIP	PHILADELPHIA PA 19103-3291	
TITLE	TT	<input type="checkbox"/> Delete
NAME	CULBERTSON, RICHARD W JR	
STREET ADDRESS	601 WHITE HORSE ROAD	
CITY-ST-ZIP	VOORHEES NJ	
TITLE	T	<input type="checkbox"/> Delete
NAME	CRABTREE, DAVID E	
STREET ADDRESS	26 COOLIDGE AVENUE	
CITY-ST-ZIP	WEST CALDWELL NJ 07006	
TITLE	T	<input type="checkbox"/> Delete
NAME	PACKER, EDWARD D.O.	
STREET ADDRESS	528 NE 8TH AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	
TITLE	TVC	<input type="checkbox"/> Delete
NAME	PACKER, ESTELLE	
STREET ADDRESS	8712 ROTHBURY LANE	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE	TC	<input type="checkbox"/> Delete
NAME	PACKER, JEFFREY	
STREET ADDRESS	5057 E. BERYL AVENUE	
CITY-ST-ZIP	PARADISE VALLEY AZ 85253	

TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE REQUIRED

9/2/03

501-439-4445

CR2E037 (4/03)