

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90222 012 ****61.25

DOCUMENT # N09286

1. Entity Name

RESIDENTIAL FOUNDATION, INC.

Principal Place of Business

Mailing Address

1375 S. UNIVERSITY DRIVE
PLANTATION FL 33324-1017

1375 S. UNIVERSITY DRIVE
PLANTATION FL 33324-4025

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

59-2534130

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

TURCK, NORMAN G.
1357 S. UNIVERSITY DR.
PLANTATION FL 33324

Name

Constance Ramos

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

1357 South University Drive

City

Plantation,

FL

Zip Code
33324

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

Constance Ramos

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

Constance Ramos

(NOTE: Registered Agent signature required when reinstating)

1/10/2000

DATE

FILE NOW:
FEES ARE \$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	D O'SHEA, DENNIS 1254 SW 116 AVE FT. LAUDERDALE FL 33326	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TAYLOR, EILEEN 529 PATIO VILLAGE WAY FT. LAUDERDALE FL 33326	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD POWERS, VALERIE 7115 SW 42 PLACE DAVIE FL 33314	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROZA, JOSEPH 627 HICKORY RD. NAPLES FL 33963	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WASSELS, BARBARA 5111 NE 17 AVE FT LAUDERDALE FL 33334	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mark Alexander 12410 South West 1st Court Plantation, Fl. 33325	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROZA Changed to BRZOZA	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P changed to PD Wassels Changed to Wessels	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ted Twist 2751 North East 7th Terrace Pompano Beach, Fl. 33064	☐ Change ☒ Addition

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: *Sol Block Administrator Sol Block* **1/10/2000** **(954) 424-3228**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)