2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State
09-12-2001 90205 009 ****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 33324-1017

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6500 W SUNRISE BLVD.	5111 NE 17 AVE.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PLANTATION FL	City & State: FORT LAUDERDALE FL
Zip: 33313 Country: USA	Zip: 33334 Country: USA

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
RAMOS, CONSTANCE 1357 S. UNIVERSITY DR. PLANTATION FL 33324	Name: BARBARA F. WESSELS Street Address (P.O. Box Number is Not Acceptable): 5111 NE 17 AVENUE City: FORT LAUDERDALE **FL** Zip Code: 33334

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: BARBARA F. WESSELS PRESIDENT 8/22/01
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 12, 2001, min. will be $236.25

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	☒ Change ☐ Addition FT LAUDERDALE, FL 33324
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	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALEXANDER, MARK 12410 S W 1ST COURT PLANTATION FL 33325	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY STEVE TAYLOR 529 PATIO VILLAGE WAY FT LAUDERDALE, FL 33326 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BRZOZA, JOSEPH 627 HICKORY RD. NAPLES FL 33963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1276 RAINBOW COURT NAPLES, FL 34110
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WESSELS, BARBARA 5111 NE 17 AVE FT LAUDERDALE FL 33334	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TWIST, TED 2751 NE 7TH TERRACE POMPANO BEACH FL 33064	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR JUDY MURPHY 5360 RIVERFRONT DRIVE APT C BRADENTON, FL 34208 ☐ Change ☒ Addition

CR2E037 (5/01)

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 8/22/01 954-331-8226
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #