

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
 04-24-2001 90045 046 ****61.25

DOCUMENT # N21928

1. Entity Name

SUN-SENTINEL CHARITIES, INC.

Principal Place of Business

**200 E LAS OLAS BLVD
 FT. LAUDERDALE FL 33301**

Mailing Address

**200 E LAS OLAS BLVD
 FT. LAUDERDALE FL 33301**

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

65-0003448

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

**HARGROVE, JOHN R.
 500 E. BROWARD BLVD.
 SUITE 1000
 FT. LAUDERDALE FL 33394**

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.

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**

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 PD ☒ Delete
 NAME JONES, MARK A
 STREET ADDRESS 333 S W 12TH AVENUE
 CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE PD ☐ Change ☒ Addition
 NAME Josie Bacallao
 STREET ADDRESS 200 E. Las Olas Blvd Ft. Laud, FL
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME GREENBERGER, SHELDON
 STREET ADDRESS 200 E LAS OLAS BLVD
 CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VP ☐ Delete
 NAME RIEDEL, MARY
 STREET ADDRESS 200 E LAS OLAS BLVD
 CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE S ☒ Delete
 NAME BURGER, MICHELLE
 STREET ADDRESS 200 EAST LAS OLAS BLVD
 CITY-ST-ZIP FT. LAUDERDALE FL

TITLE S ☐ Change ☒ Addition
 NAME Andrea Bradley
 STREET ADDRESS 200 E. Las Olas Blvd Ft. Laud, FL
 CITY-ST-ZIP

TITLE T ☐ Delete
 NAME SALVITI, CLAIRE M.
 STREET ADDRESS 200 E LAS OLAS BLVD
 CITY-ST-ZIP FT LAUDERDALE FL

TITLE D ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☒ Delete
 NAME HAMPTON, WALTER P.
 STREET ADDRESS 200 E LAS OLAS BLVD
 CITY-ST-ZIP FT LAUDERDALE FL

TITLE T ☐ Change ☒ Addition
 NAME Sylvia Carroll
 STREET ADDRESS 200 E. Las Olas Blvd Ft. Laud, FL
 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: *CLAIRE M. SALVITI* 4/17/01 (954) 356-4253

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)