2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 18, 2002 8:00 am
Secretary of State
02-18-2002 90176 043 ****61.25

DOCUMENT # N29607

1. Entity Name

HEALTHY MOTHERS/HEALTHY BABIES COALITION OF BROW ARD COUNTY, INC.

Principal Place of Business	Mailing Address
FIRST UNION NATIONAL BANK 1710 S. ANDREWS AVE. FT. LAUDERDALE FL 33316 US	P.O. BOX 030367 FT. LAUDERDALE FL 33303 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
C/O First Union Bank	PO BOX 350446
Suite, Apt. #, etc.: 1100 W SR 84	Suite, Apt. #, etc.:
City & State: Ft Lauderdale, FL	City & State: Fort Lauderdale, FL
Zip: 33315 Country: USA	Zip: 33315 Country: USA

4. FEI Number: NOT APPLICABLE ☐ 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
MODRECK, GEORGIA 12811 S.W. 9TH PLACE DAVIE FL 33325	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 Georgia Modreck Georgia Modreck, ED 1/24/02
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PETERSON, CYNTHIA 5701 NW 21ST AVE STE 440 FORT LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LAMPLOUGH, KIM 700 SE 3 AVE STE 300 FT. LAUDERDALE FL 33316	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD UDELL, BRIAN 2100 N OCEAN BLVD APT 18D FORT LAUDERDALE FL 33305	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP MODRECK, GEORGIA 1710 S ANDREWS AVE FT LAUDERDALE FL 33316	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DUBOFF, REEVE 733 BREAKERS AVE FORT LAUDERDALE FL 33304	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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.