2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State
04-23-2002 90414 044 ****70.00

DOCUMENT # N32190

1. Entity Name

FOSTER CARE REVIEW, INC.

Principal Place of Business	Mailing Address
3050 BISCAYNE BLVD SUITE#900 MIAMI FL 33137 US	3050 BISCAYNE BLVD SUITE #900 MIAMI FL 33137 US

DO NOT WRITE IN THIS SPACE

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 65-0118944 ☐ 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
ATKINS, LAURA L 3050 BISCYANE BLVD, STE 900 MIAMI FL 33137	Name: POZO, ANA MARIA Street Address (P.O. Box Number is Not Acceptable): 3050 BISCAYNE BLVD, STE 900 City: MIAMI **FL** Zip Code: 33137

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 Ana Pozo 4/2/02

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	SD SHEERAN, ANNE F. 19150 S ST ANDREWS DRIVE MIAMI FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZAWISKA, CHRISTINA A 3305 COLLEGE AVE. FORT LAUDERDALE FL 33314-7721	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ZAWISZA, CHRISTINA A	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HALSEY, DOUGLAS 200 S BISCAYNE BLVD MIAMI FL 33131-2352	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MANDEL, DAVID 169 E. FLAGLER ST. STE. 1200 MIAMI FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSTOV, BARBARA 13647 DEERING BAY DRIVE CORAL GABLES FL 33158	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SPENCE, MICHAEL A 2601 S. BAYSHORE DRIVE, STE 1450 MIAMI FL 33133	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP PD DUCKENFIELD, DAVID A 95 MERRICK WAY, STE 200 CORAL GABLES FL 33134	☒ 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.

SIGNATURE: Ana Pozo SIGNATURE REQUIRED 4/10/02 (305) 573-6665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment #

FOSTER CARE REVIEW, INC. #N32190 717460Y
Nonprofit Corporation Annual ~~Report~~ - 2002

Attachment to Block 11: Additions (Page 2)

14.1 TITLE	D
14.2 NAME	KREEGER, JUDITH L
14.3 STREET ADDRESS	175 NW FIRST AVENUE, ROOM 2114
14.4 CITY-ST-ZIP	MIAMI FL 33128
15.1 TITLE	D
15.2 NAME	LAWRENCE, LONNIE R
15.3 STREET ADDRESS	831 NW 207 STREET
15.4 CITY-ST-ZIP	MIAMI FL 33169
16.1 TITLE	D
16.2 NAME	NORTON, JOHN
16.3 STREET ADDRESS	6801 MIAMI GARDENS DRIVE
16.4 CITY-ST-ZIP	MIAMI FL 33015
17.1 TITLE	VD
17.2 NAME	SAMWAY, MICHAEL A
17.3 STREET ADDRESS	95 MERRICK WAY STE 200
17.4 CITY-ST-ZIP	CORAL GABLES FL 33134

Attachment # N32190
774604

FOSTER CARE REVIEW, INC. #N32190
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