FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 19, 2001 8:00 am **DOCUMENT # N42651 Secretary of State** 1. Entity Name 07-19-2001 90238 016 ****61.25 ADVOCATES FOR CHILDREN AND FAMILIES, INC. Mailing Address Principal Place of Business 16831 NE 6TH AVE 16831 NE 6TH AVE N MIAMI BCH FL 33162 N MIAMI BCH FL 33162 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0254656 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SLAVIN, LAURIE 20341 NE 30 AVE #109 MIAMI FL 33169 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be П Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition ☐ Delete TITLE TITLE SLAVIN, LAURIE NAME NAME 20341 NE 30 AVE 109 STREET ADDRESS STREET ADDRESS 33009 CITY-ST-7IP Hallendale MIAMI FL CITY-ST-ZIP ☐ Change ☐ Addition DST ☐ Detete TITLE TITLE ALLEN GINGER NAME NAME STREET ADDRESS 2270 POINSETTA CTM RD STREET ADDRESS CITY-ST-ZIP ≈ CITY-ST-ZIP PEMBROKE PINES FL ☐ Addition ☐ Change ☐ Delete TITLE TITI F LEDERMAN, JOANN NAME 5860 SW 117 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition TITLE ☐ Delete TITLE FOSBACK, MYRNA NAME NAME 528 ALEXANDER PALM RD STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition D ☐ Delete TITI F LAMEL, IRV NAME STREET ADDRESS 12175 SW 71ST COURT STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33156** CITY-ST-ZIP ☐ Change ☐ Addition DVP Delete TITLE MERCER, SUSAN SCHWARTZ NAME STREET ADDRESS 711 THORNRIDGE AVENUE STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP DAVIE FL

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:

cullipliant Savin 7/16/01 305-653-247