

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90014 019 ****61.25

DOCUMENT # N97000003051

1. Entity Name
THE FINDEISS FAMILY FOUNDATION, INC.



Principal Place of Business
**500 W CYPRESS CREEK RD
#210
FORT LAUDERDALE, FL 33309**

Mailing Address
**500 W CYPRESS CREEK RD
#210
FORT LAUDERDALE, FL 33309**

2. Principal Place of Business

**2100 N OCEAN BLVD
Suite, Apt. #, etc.
3101**

3. Mailing Address

**2100 N OCEAN BLVD
Suite, Apt. #, etc.
3101**

City & State

**FT LAUDERDALE FL
Zip 33305 Country Broward**

City & State

**FT LAUDERDALE FL
Zip 33305 Country Broward**

01132004 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0758555

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**FINAEISS, J CLIFFORD
500 W CYPRESS CREEK RD
#210
FORT LAUDERDALE, FL 33309**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
**2100 N OCEAN BLVD
3101
City FT LAUDERDALE FL FL Zip Code 33305**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* Trustee

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/18/04

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME FINDEISS, J. CLIFFORD
STREET ADDRESS 3120 NE 46 ST
CITY-ST-ZIP FT LAUDERDALE, FL 33308

TITLE D ☐ Delete
NAME PRINCIPE, NEIL J
STREET ADDRESS 5 ISLA BAHIA TER
CITY-ST-ZIP FT LAUDERDALE, FL 33316

TITLE D ☐ Delete
NAME CREED, JERE D
STREET ADDRESS 5901 ALMOND TER
CITY-ST-ZIP PLANTATION, FL 33317

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2100 N OCEAN BLVD # 3101**
CITY-ST-ZIP **FT LAUDERDALE, FL 33305**

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1755 SE 7th ST**
CITY-ST-ZIP **FT LAUDERDALE, FL 33316**

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: *[Signature]* Trustee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/18/04 754-566-2557