2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000007376



FILED Apr 16, 2003 8:00 am § Secretary of State

04-16-2003 90268 026 ****70 00

MBCDC:	FERNWOOD APARTMENTS,	INC.			10 2003 90200 02		
·	ce of Business VANNIA AVENUE FL 33139	Mailing Address 945 PENNSYLVANNIA AVE MIAMI BEACH FL 33139 US	NUE		SENA BOKA OTAH OTAH OTAH OTAH O		IIA Billi ICLi
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			HECK HERE IF MAKING	CHANGES	
City & Sta	te	City & State		4. FEI Number 65	0899456	_ 	oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of State	us Desired	\$8.75 Add	litional
	6. Name and Address of Curren	t Registered Agent	<u> </u>	7. Name and Addre	ss of New Registered A	gent	
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Miami bi	EACH FL 33139		•				
			City		FL	Zip Code	9
	e named entity submits this statement it	or the purpose of changing its	s registered office or regist	tered agent, or both, in th		amiliar with,	and accept
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the obliga			:				
SIGNATURE	Signature, typed or printed name of registered ager	it and title if applicable. (NOT	E: Registered Agent signature require	ired when reinstating)	DATE		
SIGNATURE		9. Election Car	TE. Registered Agent signature requirements of the property of	\$5.00 May Be Added to Fees	Make Check Florida Depart		
SIGNATURE	Signature, typed or printed name of registered ager	9. Election Car Trust Fund C	mpaign Financing	\$5.00 May Be Added to Fees	Make Check	ment of S	State
SIGNATURE	Signature, typed or printed name of registered ager . FILE NOW: FEE IS \$61.25	9. Election Car Trust Fund C	mpaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Florida Depart	ment of S	State
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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 REQUIRED