

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 11, 1999 8:00 am
Secretary of State

02-11-1999 90051 018 ****61.25

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DOCUMENT # N04403

1. Corporation Name

THE FRIENDS OF THE HEPBURN CENTER INCORPORATED

Principal Place of Business

750 N.W. 8TH AVE.
HALLANDALE FL 33009
US

Mailing Address

%ARNOLD N. LANNER
1980 S OCEAN DRIVE, APT 14-J
HALLANDALE FL 33009



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

07/27/1984

4. FEI Number

59-2710007

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

LANNER, ARNOLD N.
1980 S OCEAN DRIVE
APT 14-J
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD ☐ DELETE

NAME LANNER, ARNOLD
STREET ADDRESS 1980 S OCEAN DRIVE
CITY-ST-ZIP HALLANDALE FL

1.1 TITLE ☐ Change ☐ Addition

TITLE VPD ☐ DELETE

NAME ROSNER, AL
STREET ADDRESS 1980 S. OCEAN DR.
CITY-ST-ZIP HALLANDALE FL

1.2 NAME

TITLE TC ☐ DELETE

NAME BELTZER, SYLVIA
STREET ADDRESS 1000 NE 14TH AVENUE
CITY-ST-ZIP HALLANDALE FL

1.3 STREET ADDRESS

TITLE D ☐ DELETE

NAME HAVIER, HARRIET
STREET ADDRESS 810 N.E. 12TH AVE.
CITY-ST-ZIP HALLANDALE FL

1.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME KUPFER, JACK
STREET ADDRESS 800 PARKVIEW DRIVE
CITY-ST-ZIP HALLANDALE FL

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME LANNER, JOANNE
STREET ADDRESS 1980 S. OCEAN DR
CITY-ST-ZIP HALLANDALE FL

2.2 NAME

TITLE D ☐ DELETE

NAME LANNER, JOANNE
STREET ADDRESS 1980 S. OCEAN DR
CITY-ST-ZIP HALLANDALE FL

2.3 STREET ADDRESS

TITLE D ☐ DELETE

NAME LANNER, JOANNE
STREET ADDRESS 1980 S. OCEAN DR
CITY-ST-ZIP HALLANDALE FL

2.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME LANNER, JOANNE
STREET ADDRESS 1980 S. OCEAN DR
CITY-ST-ZIP HALLANDALE FL

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME LANNER, JOANNE
STREET ADDRESS 1980 S. OCEAN DR
CITY-ST-ZIP HALLANDALE FL

3.2 NAME

TITLE D ☐ DELETE

NAME LANNER, JOANNE
STREET ADDRESS 1980 S. OCEAN DR
CITY-ST-ZIP HALLANDALE FL

3.3 STREET ADDRESS

TITLE D ☐ DELETE

NAME LANNER, JOANNE
STREET ADDRESS 1980 S. OCEAN DR
CITY-ST-ZIP HALLANDALE FL

3.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Arnold N. Lanner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/99

Date

954
454-9538

Daytime Phone #

CR2E037 (11/98)