

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 05, 2004
Secretary of State**

DOCUMENT# N03000006375

Entity Name: CORAL SPRINGS FOUNDATION, INC.

Current Principal Place of Business:

18333 NW 7TH STREET
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

1801 S.PERIMETER ROAD
150
FT. LAUDERDALE, FL 33309 US

Current Mailing Address:

18333 NW 7TH STREET
PEMBROKE PINES, FL 33029 US

New Mailing Address:

1801 S. PERIMETER ROAD
150
FT. LAUDERDALE, FL 33309 US

FEI Number: 38-3696225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAROL, IBRAHIM
1555 PENNSYLVANIA AVENUE
SUITE # 108
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VAROL, IBRAHIM
Address: 1555 PENNSYLVANIA AVENUE SUITE # 108
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VP () Delete
Name: SAHIN, MUSTAFA G
Address: 18333 NW 7TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: VP () Delete
Name: AFACAN, ISA
Address: 1421 SW 67TH AVENUE SUITE # 55
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SAHIN, MUSTAFA G
Address: 8524 SW 107TH AVENUE SUITE C4
City-St-Zip: MIAMI, FL 33173 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IBRAHIM VAROL

P

04/05/2004

Electronic Signature of Signing Officer or Director

Date