

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Sep 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **708383** (5)

1. Corporation Name

UNITY ON THE BAY, INC.

Principal Place of Business

Mailing Address

**411 NORTHEAST 21ST STREET
MIAMI FL 33137**

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MIAMI FL 33137**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/29/1965** 3a. Date of Last Report **03/18/1996**

4. FEI Number **59-0816468** 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**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip 29 Country 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CAMERON, WILLIAM E.
411 N.E. 21ST STREET
MIAMI FL 33137**

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	P	☐ DELETE
NAME	GAGE, RANDY	
STREET ADDRESS	1010 SHORE LANE	
CITY-ST-ZIP	MIAMI BEACH FL 33141	
TITLE	VT	☐ DELETE
NAME	GOLINO, PATRICIA	
STREET ADDRESS	825 NE 178 ST	
CITY-ST-ZIP	N. MIAMI BEACH FL 33162	
TITLE	TD	☒ DELETE
NAME	MARTIN, HAL	
STREET ADDRESS	3630 SW 123 CT	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	☐ DELETE
NAME	BURKE, JAY	
STREET ADDRESS	P.O. BOX 22-3100 NA	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	S	☒ DELETE
NAME	INGRAM, MARY	
STREET ADDRESS	59 NE 92 ST	
CITY-ST-ZIP	MIAMI SHORES FL 33138	
TITLE	T	☒ DELETE
NAME	GAGLIANO, JOSEPH	
STREET ADDRESS	14515 SW 108TH TERRACE	
CITY-ST-ZIP	MIAMI FL	

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	GOLINO, PATRICIA	
1.3 STREET ADDRESS	825 N.E. 178 ST	
1.4 CITY-ST-ZIP	N. MIAMI BEACH, FL 33162	
2.1 TITLE	V	☐ Change ☒ Addition
2.2 NAME	Berg Jill	
2.3 STREET ADDRESS	5600 Collins Ave #4P	
2.4 CITY-ST-ZIP	Miami Beach, FL 33140	
3.1 TITLE	T	☐ Change ☒ Addition
3.2 NAME	Hobley Yvonne	
3.3 STREET ADDRESS	5250 NW 30th Ave.	
3.4 CITY-ST-ZIP	Miami, FL 33142	
4.1 TITLE	TR	☒ Change ☐ Addition
4.2 NAME	GAGE Randy	
4.3 STREET ADDRESS	1680 Michigan Ave # 1036	
4.4 CITY-ST-ZIP	Miami Beach, FL 33139	
5.1 TITLE	S	☐ Change ☒ Addition
5.2 NAME	MORENO MARTHA	
5.3 STREET ADDRESS	1427 Cecilia Ave	
5.4 CITY-ST-ZIP	Corral Gables, FL 33146	
6.1 TITLE	TR	☒ Change ☐ Addition
6.2 NAME	BURKE JAY	
6.3 STREET ADDRESS	P.O. Box 22-3100 NA	
6.4 CITY-ST-ZIP	HOLLYWOOD, FL 33022-3100	

14. I do 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.

SIGNATURE **Sandra B. Mortham** 9/15/97 (305) 653-8774

CR2E037 (4/97)