

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714837

1. Entity Name

GREATER MIAMI PROGRESS FOUNDATION, INC.

FILED

Feb 14, 2002 8:00 am
Secretary of State

02-14-2002 90098 032 ****61.25

Principal Place of Business

Mailing Address

% GREATER MIAMI CHAMBER OF COMMERCE
1601 BISCAYNE BLVD.
MIAMI FL 33132

% GREATER MIAMI CHAMBER OF COMMERCE
1601 BISCAYNE BLVD.
MIAMI FL 33132

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6216592

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CULLOM, WILLIAM
1601 BISCAYNE BLVD.
MIAMI FL 33132

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME AJAMIL, LUIS
STREET ADDRESS 2601 SOUTH BAYSHORE DR #1000
CITY-ST-ZIP MIAMI FL 33133

TITLE D ☐ Change ☒ Addition
NAME Susan Potter-Norton
STREET ADDRESS 121 Majorca Avenue, 3rd Floor
CITY-ST-ZIP Coral Gables, FL 33134

TITLE DC ☐ Delete
NAME GOODE, R. RAY
STREET ADDRESS 3600 N.W. 82ND AVE
CITY-ST-ZIP MIAMI FL

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

TITLE D ☐ Delete
NAME CULLOM, WILLIAM O.
STREET ADDRESS 1601 BISCAYNE BLVD.
CITY-ST-ZIP MIAMI FL

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

TITLE D ☐ Delete
NAME FINE, MARTIN
STREET ADDRESS 701 BRICKELL AVENUE, #3000
CITY-ST-ZIP MIAMI FL

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

TITLE D ☐ Delete
NAME PAUL, ROBERT
STREET ADDRESS 1401 BRICKELL AVE
CITY-ST-ZIP MIAMI FL 33131

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

TITLE D ☐ Delete
NAME HOLZBERG, RHODELE D
STREET ADDRESS 1601 BISCAYNE BLVD
CITY-ST-ZIP MIAMI FL 33132

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 305-350-7903

CR2E037 (9/01)