

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 09, 2004 8:00 am**  
**Secretary of State**

02-09-2004 90017 045 \*\*\*\*61.25

**DOCUMENT # 720478**



1. Entity Name  
**THE AMERICAN CIVIL LIBERTIES UNION FOUNDATION  
OF FLORIDA, INC.**

Principal Place of Business  
4500 BISCAYNE BLV  
340  
MIAMI, FL 33137 US

Mailing Address  
4500 BISCAYNE BLVD.  
340  
MIAMI, FL 33137 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01202004 Chg-NP CR2E037 (10/03)

4. FEI Number  
23-7137529

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

SIMON, H  
4500 BISCAYNE BLVD  
STE 215  
MIAMI, FL 35137

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VD ☒ Delete  
NAME WILDER, ROSEMARY  
STREET ADDRESS 9785 PALMETTO CLUB DR.  
CITY-ST-ZIP MIAMI, FL 33157

TITLE TD ☒ Delete  
NAME PHENEGER, MICHAEL  
STREET ADDRESS 4219 HOLLOW TR. DR.  
CITY-ST-ZIP TAMPA, FL 33624

TITLE SD ☒ Delete  
NAME URICK, RON  
STREET ADDRESS 1130 SW CHAPMAN WAY, #507  
CITY-ST-ZIP PALM CITY, FL 34990

TITLE PD ☒ Delete  
NAME BOYD, BILL  
STREET ADDRESS 801 3RD ST S  
CITY-ST-ZIP ST PETE, FL 33701

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☒ Change ☐ Addition  
NAME Jeanne Baker  
STREET ADDRESS 758 University Drive  
CITY-ST-ZIP Coral Gables, FL 33134

TITLE Vice President ☒ Change ☐ Addition  
NAME Rosemary Wilder  
STREET ADDRESS 9785 Palmetto Club Dr. Miami, FL 33157  
CITY-ST-ZIP

TITLE Secretary ☒ Change ☐ Addition  
NAME Steve Phillippy  
STREET ADDRESS 14105 Stonebrook Ct.  
CITY-ST-ZIP Tampa, FL 33624

TITLE Treasurer ☒ Change ☐ Addition  
NAME Michael E. Pheneger  
STREET ADDRESS 4219 Hollow Trail Drive  
CITY-ST-ZIP Tampa, FL 33624

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

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:**

*Haward Simon* Haward Simon, Executive Director 2/2/04

Date

305-576-2337

Daytime Phone #