

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90035 006 ***61.25

DOCUMENT # 735454

1. Entity Name

LOUIS AARON REITMEISTER FOUNDATION, INC.

Principal Place of Business

Mailing Address

MAC MERMELL
5875 S.W. 129TH TERR.
MIAMI FL 33156

MAC MERMELL
5875 S.W. 129TH TERR.
MIAMI FL 33156

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

59-1657761

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

MERMELL, MAC
5875 S.W. 129TH TERR.
MIAMI, FL - FL 33156

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 **ROSENDAHL, BRUCE R**
 STREET ADDRESS **4600 RICKENBACKER CAUSEWAY**
 CITY-ST-ZIP **MIAMI FL**

TITLE **PTD** ☐ Delete
 NAME **MERMELL, MAC**
 STREET ADDRESS **5875 SW 129TH TERR**
 CITY-ST-ZIP **MIAMI, FL 00000-33156** **OK**

TITLE **TD** ☒ Delete
 NAME **MERMELL, PEGGY**
 STREET ADDRESS **5875 SW 129 TERRACE**
 CITY-ST-ZIP **MIAMI, FL 00000**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **D. OTIS BROWN, DEAN**
 STREET ADDRESS **U of M Rosenstiel School**
 CITY-ST-ZIP **4600 Rickenbacker Causeway**
MIAMI FL 33149

TITLE ☐ Change ☒ Addition
 NAME **DR DEBRA MILLER**
 STREET ADDRESS **12200 SW 68 COURT**
 CITY-ST-ZIP **MIAMI FL 33156**

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

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:

MAC MERMELL 2/7/02 305.665.7113

CR2E037 (9/01)