

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90346 010 ****61.25

DOCUMENT # 740598

1. Entity Name
GIDEON FOUNDATION, INC.



Principal Place of Business

**6496 CORAL WAY
MIAMI FL 33155-1949**

Mailing Address

~~6496 CORAL WAY~~
~~MIAMI FL 33155-1949~~

New
**PO BOX 830225
MIAMI FL 33283**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

**PO BOX 830225
MIAMI FL 33283**

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2181066**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GIDEON, E. C.
6496 CORAL WAY
MIAMI FL FL**

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25

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 **GIDEON, RICHTER**
STREET ADDRESS **5600 SW 108**
CITY-ST-ZIP **MIAMI FL 33173**

TITLE **STD** ☐ Delete
NAME **GIDEON, HEATHER H**
STREET ADDRESS **6496 CORAL WAY**
CITY-ST-ZIP **MIAMI FL**

TITLE **PD** ☐ Delete
NAME **GIDEON, E C**
STREET ADDRESS **6496 CORAL WAY**
CITY-ST-ZIP **MIAMI FL**

TITLE **VD** ☐ Delete
NAME **MARKHAM, TERRY**
STREET ADDRESS **2720 WATERS EDGE DRIVE**
CITY-ST-ZIP **DALLAS TX 75104**

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 ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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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 19.07(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: *Heather H Gideon* **1-22-03** **305-666-3878**
305-275-7287

CR2E037 (10/02)