

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 758115

FILED
Feb 03, 2003
Secretary of State

Entity Name: THE MACKLE FOUNDATION, INC.

Current Principal Place of Business:

10880 NW 30TH ST
MIAMI, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

10880 NW 30TH ST
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 59-2142642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKLE, III, FRANK E
10880 NW 30TH ST
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MACKLE, FRANK E III
Address: 10880 NW 30TH ST
City-St-Zip: MIAMI, FL 00000, 33172

Title: D () Delete
Name: MACKLE, VIRGINIA S.
Address: 10880 NW 30TH ST
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: MYRTETUS, JOSEPH W.,
Address: 7900 RED ROAD
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK E. MACKLE III

D

02/03/2003

Electronic Signature of Signing Officer or Director

Date