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

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCOMEN I # 103000000913									
1. Entity Name									
Caron Founda	tion of	Florida.	Inc.						



	DO NOT WRITE	IN THIS	SPA	GE						
2. Principal Pl	ace of Business	3. Mailing Address	Adas de de Constitue de la constitue S		or Periodical Control					
	th Federal Hwy.	Galen Hall		Box 150						.11
Suite, Apt. #, etc. Suite, Apt. #, etc.		tc.			DO NOT WRITE IN THIS SPACE 0)4		
Cily & State)	City & State				4. FEI Number 0	61675898		Applied For	i i
Boca Rat		Wernersvil.							Not Applica	ble
Zip 33432	Country Palm Beach	Zip 19565	I	ountry rks		Certificate of Status Desired Section Section Section Sectio				
33432 Shirings	Constant and the constant of t	19303 September (Mark)	j be. Masangsina	TKB		7. Name and Addr	ess of Current Re			
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	DO NOT W	RITE		Corporation Service Company Street Address (P.O. Box Number is Not Acceptable)						
4. 4. 7046	'IN THIS SP	of straductions and highlands		1201	Hayes	Street				
Children						*************************************	-			•
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	named entity submits this statement for	the purpose of chan	ging its regist	ered office o	register	ed agent, or both, in	the state of Florida	a. I am fan		pt
the obligati	ions of registered agent.									`
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable	N/A (NOTE: Regist	ored Agent signal	ure required	when rainstating)	•	DATE		
40.00		20180							Salara da Salara	
at Progression sea grant to the second grant to the second to the second	FEE IS \$61.25 Initial or Amended UBR		tion Campaigr t Fund Contrib			\$5.00 May Be Added to Fees	「大学の大学の大学を大学では、またまでは、10gg	THE RESPONDING THE RES	Payable to nent of State	
10.	OFFICERS AND DIF	ECTORS	1.4 P 0.4 kg 2.4 g	relijihe kardi	ang ka	ukodesa subtemble	e is Ball Trail unit		antarak atan min	Hanner Hanner
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TITLE	T/D		ŰŤ	TLE FOR HILL	gra Cal				jak <i>e</i> t.	7 CR2E0378 (12/02
NAME	David A. Murdoch, Esqu	ire	1.4	AME		กาวเฉ้	วกั4=-กับกัด		3915 8 ** 61:2	e 8
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12. I hereby certify that the information supplied with this filling 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 on an attachment with an address, with all pringer like empowered.

SIGNATURE:

David A.

12/17/03

610-678-2332 ext.218

Dayline Phone i