

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 23, 2001 08:00 AM****Secretary of State****DOCUMENT # F98000006396**1. Entity Name
THE VALOR FOUNDATION, INC.Principal Place of Business
1101 HILLCREST DRIVE
HOLLYWOOD FL 33021
Mailing Address
1101 HILLCREST DRIVE
HOLLYWOOD FL 330212. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-1839448
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required**6. Name and Address of Current Registered Agent**MIAMI CENTER REGISTERED AGENTS, INC.
1700 MIAMI CENTER
201 S. BISCAYNE BLVD.
MIAMI FL 33131 US**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.

SIGNATURE _____ **03/23/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) 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**

TITLE	D	<input type="checkbox"/> Delete
NAME	DEARIAS LILLIAN	
STREET ADDRESS	1101 HUCREST DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	SED	<input type="checkbox"/> Delete
NAME	MOORE DOROTHY	
STREET ADDRESS	1101 HILLCREST DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GIBBONS DOROTHY	
STREET ADDRESS	1101 HILLCREST DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAVIDSON JULIA	
STREET ADDRESS	1101 HILLCREST DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	BROWER LINDA	
STREET ADDRESS	1101 HILLCREST DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	CPC	<input type="checkbox"/> Delete
NAME	TOBIN HERBERT A	
STREET ADDRESS	1101 HILLCREST DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33021	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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: HERBERT A. TOBIN CPC **03/23/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (11/00)

CARY HARWIN, DIRECTOR
1101 HILLCREST DRIVE

HOLLYWOOD, FL 33021