2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>EDWARNOLR</u>

Apr 30, 2002 8:00 am § Secretary of State DOCUMENT # N00000000638 1. Entity Nazoe SOCIETY FOR THE ADVANCEMENT OF THE HANDICAPPED, 04-30-2002 90032 009 ****70.00 INC. Principal Place of Business Mailing Address 275 VIA ROSADA 275 VIA ROSADA 200117 FOYAL PALM PLAZA ROYAL PALM PLAZA FROM RATON FL 33432 **BOCA RATON FL 33432** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 65-0977692 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE **CORAL GABLES FL 33134** 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) -1, 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ecritain **X** Addition ☐ Delete TITLE ☐ Change TITLE BARABAS, RUTH 22940 FIORALWOOD HAVE BOCA RATON, FL. 33433 RAUCH, EDWARD NAME NAME 275 VIA ROSADA, ROYAL PALM PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Delete TITLE Change ☐ Addition wrinkle. James NAME 275 VIA ROSADA, ROYAL PALM PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Delete ☐ Change Addition TITLE TITLE ANELLO, LORRAINE C NAME NAME STREET ADDRESS 275 VIA ROSADA, ROYAL PALM PLAZA STREET ADDRESS CITY*ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** □ Delete TITLE ☐ Change ☐ Addition TITLE RAUCH, DORA NAME NAME STREET ADDRESS STREET ADDRESS 275 VIA ROSADA, ROYAL PALM PLAZA CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Delete ☐ Change ☐ Addition TITLE-TITLE DALY, JOAN C NAME NAME STREET ADDRESS 275 VIA ROSADA. ROYAL PALM PLAZA STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL 33432** Delete TITLE TITLE ☐ Change ☐ Addition NELLO, NATHAN NAME NAME STREET ADDRESS 275 VIA ROSADA, ROYAL PALM PLAZA STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL 33432** 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 Forida Statutes; and that my name appears in Block 10 or Block 11 if

FILED