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

DOCUMENT # N0000001477

1. Entity Name

STACY FOUNDATION BUILDING, INC.



FILED Mar 27, 2003 8:00 am Secretary of State 03-27-2003 90081 011 ****61.25

Principal Place 5110 N. FEDE FT. LAUDERDA		Mailing Address 5110 N. FEDERAL HWY. FT. LAUDERDALE FL 33308	3						
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 65-1027392			Applied For	
Zip Country		Zip Cou		ntry	5. Certificate of Sta		\$8.75 Additional Fee Required		
	6Name and Address of Current I	Realstered Agent		,	7. Name and Addr	ess of New Registered A		eu	
		-		Name*					
STEPELT	ON, DOUGLAS			Street Addres	ess (P.O. Box Number is Not Acceptable)				
	FEDERAL HWY.		Silvet Address (F.C.						İ
FT. LAUL	DERDALE FL 33308								l
				City		FL	Zip Co	de	l
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or regis	stered agent, or both, in t		<u>l</u> amiliar with	, and accept	l
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE 9. Election Cam Trust Fund C	npaign F	inancing	uired when reinstating) \$5.00 May Be Added to Fees	DATE Make Check Florida Depart			
10. ,	OFFICERS AND DIR	FCTORS	11.		ADDITIONS (CHANGE	S TO OFFICERS AND DIR	ECTORS II	V 10	
TITLE,	D	Delete	TITLE		ADDITIONS/CHANGE	3 TO OFFICERS AND DIN	Change	Addition	2
NAME	STEPELTON, DOUGLAS	23.00	NAM						7
STREET ADDRESS	5110 N. FEDERAL HWY.			ET ADDRESS					37.
CITY-ST-ZIP	FT. LAUDERDALE FL 33308			ST-ZiP					Ä
TITLE NAME	D Stepelton, Brett S	☐ Delete	TITLE				Change	☐ Addition	č
STREET ADDRESS	5110 N. FEDERAL HWY.		NAME STREE	T ADDRESS				Ì	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308			ST- ZIP					
TITLE	D	☐ Delete	TITLE				☐ Change	Addition	
NAME	STEPELTON, VIRLEE STACY		NAME						
STREET ADDRESS	5110 N. FEDERAL HWY.			T ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33308		CITY-	ST-ZIP					
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NAME			NAME	İ			-		
STREET ADDRESS				T ADDRESS				ļ	
CITY-ST-ZIP			CITY-	ST-ZIP	·				

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, 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.

Pourles A. Steper TON 3/14/