2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 15, 2002 8:00 am Secretary of State DOCUMENT # N00000007224 1. Entity Name 05-15-2002 90139 035 ****61.25 SHAW UNIVERSITY FLORIDA ALUMNI - REGION ONE, INC Principal Place of Business Mailing Address 5610 NW 174 DRIVE 5610 NW 174 DRIVE MIAMI FL 33055 MIAMI FL 33055 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1033397 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) SAMMS. EVA DOLORES 5610 NW 174TH DR. MIAMI FL 33055-3539 City Zip Code FL 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 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. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SAMMS, EVA DOLORES NAME STREET ADDRESS 5610 NW 174TH DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33055-3539 TITLE SD ☐ Delete TITLE ☐ Addition ☐ Change NAME TUCKER, ELIZABETH NAME STREET ADDRESS 2860 NW 185TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33055 TITLE TD ☐ Delete ☐ Change ☐ Addition MIMS, NORMA NAME NAME STREET ADDRESS 3010 NW 165TH-ST. - --STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33054 TITLE □ Delete TITLE ☐ Change ☐ Addition NAME MCKOY, S. FRANK NAME STREET ADDRESS 2350 NE 173RD ST., #315 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N. MIAMI BCH FL 33160 ☐ Delete TITLE Change Addition NAME HUNT, BETTY NAME STREET ADDRESS 2101 NW 187TH TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI_FL_33056 TITLE ☐ Delete TITLE Change ☐ Addition NAME FINLAY, VINCENT R NAME STREET ADDRESS 1140 NE 163RD ST., #5 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>N. MIAMI BCH FL 33162</u>

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.