

**2002 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Mar 26, 2002 8:00 am**  
**Secretary of State**

03-26-2002 90039 014 \*\*\*\*61.25

**DOCUMENT # N00000008179**

1. Entity Name

**THE STEPHEN S. RICHTER FOUNDATION FOR THE PERPET  
UATION OF ENVIRONMENTAL IDEALS, INC.**

Principal Place of Business

Mailing Address

**516 SW 4TH AVENUE  
FORT LAUDERDALE FL 33315****516 SW 4TH AVENUE  
FORT LAUDERDALE FL 33315**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

**31-1743705**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WOLF, BARBARA L ESQ.  
2425 E. COMMERCIAL BOULEVARD  
SUITE 307  
FORT LAUDERDALE FL 33308**

-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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
RICHTER, SIDNEY  
7200 RADICE COURT, #602  
LAUDERHILL FL 33319** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**EVPD  
HAMMER, STEPHEN  
516 S.W. 4TH AVENUE  
FT. LAUDERDALE FL 33315** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AVPD  
RICHTER, JENNY  
7200 RADICE COURT, #602  
LAUDERHILL FL 33319** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AVPD  
HAMMER, PAUL B  
516 S.W. 4TH AVENUE  
FT. LAUDERDALE FL 33319** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
WOLF, BARBARA L  
2425 E. COMMERCIAL BLVD., #307  
FT. LAUDERDALE FL 33308** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ASD  
PATESTIDES, MICHAEL  
300 HARBORTOWN ROAD  
FT. LAUDERDALE FL 33319** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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, 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: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Vice-President  
Stephen Hammer**

Date

Daytime Phone #

**3/8/02 959 467-6558**

CR2E037 (9/01)