

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90015 029 ****61.25

DOCUMENT # N00669

1. Entity Name

LEJEUNE FOUNDATION INC.

Principal Place of Business

Mailing Address

9715 S.W. 142 DRIVE
 MIAMI FL 33176-3741

9715 S.W. 142 DRIVE
 MIAMI FL 33176-6741

2. Principal Place of Business

4712 Pepper Bush Lane

3. Mailing Address

4712 Pepper Bush

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boynton Beach, FL.

City & State

Boynton Beach, FL.

Zip

33436

Country

Zip

33436

Country

4. FEI Number

59-2382578

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

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)

City

FL

Zip Code

**CORPORATION COMPANY OF MIAMI
 1500 EDWARD BALL BLDG.
 100 CHOPIN PLAZA, KK.
 MIAMI FL 33131**

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 Delete
 NAME **SD**
 STREET ADDRESS **EBERST, JANET A**
 CITY-ST-ZIP **9715 SW 142 DR**
MIAMI FL 33176

TITLE Change Addition
 NAME
 STREET ADDRESS **4712 Pepper Bush Lane**
 CITY-ST-ZIP **Boynton Beach, FL 33436**

TITLE Delete
 NAME **TD**
 STREET ADDRESS **LUCAS, DAWN A**
 CITY-ST-ZIP **39 CLUB FOREST LN**
GREENVILLE SC 29605

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **PCD**
 STREET ADDRESS **EBERST, ROBERT C**
 CITY-ST-ZIP **9715 S.W. 142 DRIVE**
MIAMI FL 33176

TITLE Change Addition
 NAME
 STREET ADDRESS **4712 Pepper Bush Lane**
 CITY-ST-ZIP **Boynton Beach, FL 33436**

TITLE Delete
 NAME **VD**
 STREET ADDRESS **EBERST, ROBERT B.**
 CITY-ST-ZIP **5318 JOG LANE**
DELRAY BEACH FL

TITLE Change Addition
 NAME
 STREET ADDRESS **4712 Pepper Bush Lane**
 CITY-ST-ZIP **Boynton Beach, FL 33436**

TITLE Delete
 NAME **D**
 STREET ADDRESS **SWAIN, DORIS**
 CITY-ST-ZIP **3708 ROSWELL PLACE**
MONTGOMERY AL.

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change 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)(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: Robert C. Eberst **Robert C. Eberst** 1/17/2000 561-752-4960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #