

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90068 034 ****61.25

DOCUMENT # N01000000345

1. Entity Name

FRIEDA AND BARNETT GUTHARTZ FAMILY FOUNDATION, I NC.

Principal Place of Business

Mailing Address

**4685 HAVERHILL RD
 WEST PALM BEACH FL 33417**

**55 WESTON RD. SUITE 400
 FT LAUDERDALE FL 33326**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1069399

Applied For

Not Applicable

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

**KAHN, JEFFREY B
 6598 NW 97 DR
 PARKLAND FL 33076**

Name

BARNETT GUTHARTZ

Street Address (P.O. Box Number is Not Acceptable)

55 WESTON RD. Suite 400

City

FT. LAUDERDALE

FL

Zip Code

33326

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

Barnett Guthartz (Pres.)

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/02

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	PRESIDENT/DIRECTOR <input type="checkbox"/> Delete BARNETT GUTHARTZ 55 WESTON ROAD-400 FT. LAUD. FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES./DIRECTOR <input type="checkbox"/> Delete JANET BARRY 55 WESTON ROAD-400 FT. LAUD. FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY/DIRECTOR <input type="checkbox"/> Delete J. BARRY 55 WESTON-400 FT. LAUD. FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES./DIRECTOR <input type="checkbox"/> Delete R. BARRY 55 WESTON ROAD-400 FT. LAUD. FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREAS. <input type="checkbox"/> Delete LAURENCEIMBER 55 WESTON ROAD-400 FT. LAUD. FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Barnett Guthartz (Pres.) **BARNETT GUTHARTZ (Pres)** **4/24/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Residence Phone #

CR2E037 (9/01)