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

## DOCUMENT # N0100000345

1. Entity Name

Zip

Principal Place of Business

FRIEDA AND BARNETT GUTHARTZ FAMILY FOUNDATION, I



01-16-2003 90100 040 \*\*\*\*61.25

Jan 16, 2003 8:00 am Secretary of State

**FILED** 

NC.

4685 HAVERHILL RD 55 WESTON RD. SUITE 400 WEST PALM BEACH FL 33417 FT LAUDERDALE FL 33326 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

Mailing Address

60007644



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1069399 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional

6. Name and Address of Current Registered Agent GUTHARTZ, BARNETT 55 WESTON RD SUITE 400 FORT LAUDERDALE FL-33326 ----

7. Name and Address of New Registered Agent Name

Street Address (P.O. Box Number is Not Acceptable) The transfer of the second of the second City 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. I am familiar with, and accept

Country

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

Country

(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 Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE □ Delete TITLE Change NAME GUTHARTZ, BARNETT ☐ Addition NAME STREET ADDRESS 55 WESTON ROAD SUITE 400 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33326 CITY-ST-ZIP **VPD** TITLE ☐ Delete TITLE BARRY, JANET ☐ Change NAME ☐ Addition NAME 55 WESTON ROAD SUITE 400 STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP FORT LAUDERDALE FL 33326 CITY-ST-ZIP TITLE ☐ Delete TITLE BARRY, J NAME ☐ Change ☐ Addition NAME STREET ADDRESS 55 WESTON ROAD SUITE 400 STREET ADDRESS CITY-ST-ZIE FORT LAUDERDALE FL 33326 CITY-ST-ZIP TITLE **VPD** ☐ Delete TITLE NAME BARRY, R ☐ Change ☐ Addition NAME STREET ADDRESS 55 WESTON ROAD SUITE 400 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33326 CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME imber, Lawrence ☐ Addition NAME 55 WESTON ROAD SUITE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33326 CITY-ST-ZIP TITLE Delete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS 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 changed, or on an attachment with an address, with all other like empowered.