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

DOCUMENT # N0100000969

1. Entity Name

THE HIGH ROAD FOUNDATION, INC.								01-10-2003 30	.052 07		71.23
601 BRICKELL KEY DRIVE STE 401 601 B			ailing Address BRICKELL KEY DRIVE STE 401 MI FL 33131			60005353					
2. Principal	Place of Business	3. Ma	ling Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State Ci			Dity & State			4. FEI Number 31-1650339 Applied For					
Zip	Country	Zi	0	Cou	intry		5. Certificate of St			8.75 Ad	
	6. Name and Address of Curren	 t Registere	ed Agent				7. Name and Add		_ F	ee Require	ed
					Name						
ELDER, DAVID R 12920 OLD CUTLER ROAD MIAMI FL 33156					Street Address (P.O. Box Number i			lot Acceptable)			
(MD-WH) I	L 00130				City					l =: . o.	
	e named entity submits this statement for		-		•				FL	Zip Cod	
FILE NOW: FEE IS \$61.25						\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State					
10.	OFFICERS AND DI	RECTORS		11.		A(L DDITIONS/CHANGE	S TO OFFICERS A	ND DIRE	CTORS IN	110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELDER, DAVID R 12920 OLD CUTLER ROAD MIAMI FL 33156		☐ Delete			316	aelena Gu NE 4th St Lauderda	reet	-	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELDER, FREDRICA 8 12920 OLD CUTLER ROAD MIAMI FL 33156		☐ Delete			D Vin 265	cent F. V 1 Regalia	accarell Way	a a	Change	▼ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GUITIAN, MARIAELENA 100 NE 3RD AVE STE 850 FT LAUDERDALE FL 33301	-	☐ Delete		T ADDRESS ST-ZIP	D Jef: 826	frey Zesk 0 SW 160	ind Street		Change	Addition
TITLE NAME STREET ADDRESS DITY-ST-ZIP	D HOLLADAY, LEON 10860 SW 120 STREET MIAMI FL 33176		☐ Delete	TITLE NAME STREET	T ADDRESS	D Mare 826	mi, FL 33 gie Zeski O SW 160	nd Street		Change	XX Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	D PARKS, SHERRY 7460 SW 130 STREET MIAMI FL 33156		☐ Delete	TITLE NAME STREET	ADDRESS	riid	mi, FL 33	+ 3 /] Change	Addition
ITLE IAME TREET ADORESS	D WILLIAMS, ERMA I 20581 SW 124 COURT		☐ Delete	TITLE NAME STREET	ADDRESS] 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. MENIATORE REQUIRED **SIGNATURE:**

CITY-ST-ZIP

MIAMI FL 33177

CITY-ST-ZIP

Elder

<u> 1/8/03</u>

FILED

Jan 10, 2003 8:00 am Secretary of State

<u>3053736522</u>