

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-11-2002 90001 003 ****61.25

DOCUMENT # N01000004454

1. Entity Name

PASTORAL CARE FOUNDATION, INC.

Principal Place of Business

Mailing Address

4846 NORTH UNIVERSITY DRIVE, NO. 306
 FT. LAUDERDALE FL 33351

4846 NORTH UNIVERSITY DRIVE, NO. 306
 FT. LAUDERDALE FL 33351

60040

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

65-1116214

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

HESS, THOMAS J ESQ.
 VAZQUEZ & HESS, LLC
 601 BRICKELL KEY DRIVE
 MIAMI FL 33131

Name

~~REV. ROBERT CHALNICK~~
 PASTORAL CARE FOUNDATION, INC

4846 N. UNIV. DR. # 306

City

FT. LAUD.

FL

Zip Code

33351

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: REV. ROBERT I CHALNICK *Rev. Robert I Chalnick*

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

(NOTE: Registered Agent signature required when reinstating)

1/8/2002

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

TITLE: REV. ROBERT I CHALNICK Delete *Rev. Chalnick*
 NAME: REV. ROBERT I CHALNICK
 STREET ADDRESS: 1021 NW 108 AVE
 CITY-ST-ZIP: PLANTATION, FL 33324

TITLE: JAYNE BAUER-HUGES, ESQ Delete *Jayne*
 NAME: JAYNE BAUER-HUGES, ESQ
 STREET ADDRESS: 5910 INVERARY BLD # 13-705
 CITY-ST-ZIP: CAVON HILL, FL 33319

TITLE: REV. BETTE LIGHT Delete *Director*
 NAME: REV. BETTE LIGHT
 STREET ADDRESS: 658 NIGHTHAWK CIR.
 CITY-ST-ZIP: WINTER SPRINGS, FL 32752

TITLE: JEAN DORA DAVIS Delete *Director*
 NAME: JEAN DORA DAVIS
 STREET ADDRESS: 600 SE 3RD AVE, 7TH FL
 CITY-ST-ZIP: FT. LAUD., FL 33301

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
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TITLE: Change Addition
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 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 I CHALNICK *Rev. Robert I Chalnick* Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)