

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

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90103 009 ****61.25

DOCUMENT # N01000004501

1. Entity Name
ACCESS FOUNDATION CORPORATION



Principal Place of Business

**1749 NW 26TH ST., SUITE F
FT. LAUDERDALE FL 33305**

Mailing Address

**1749 NW 26TH ST., SUITE F
FT. LAUDERDALE FL 33305**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

1749 NE 26 St

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Wilton Manors

City & State

Zip

Country

Zip

Country

4. FEI Number **52-2336964**

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

Name

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

City

FL

Zip Code

**ZADEN, RICHARD ESQ.
1749 NW 26TH ST., SUITE F
FT. LAUDERDALE FL 33305**

NE

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 the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/7/03

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 **D** ☐ Delete
NAME **WARDELL, PHIL**
STREET ADDRESS **1749 NW 26TH ST., SUITE F**
CITY-ST-ZIP **FT. LAUDERDALE FL 33305**

TITLE **D** ☐ Change ☒ Addition
NAME **Lopez, Paul**
STREET ADDRESS **501 N.E. Spanish Court**
CITY-ST-ZIP **Boca Raton, FL 33432**

TITLE **D** ☐ Delete
NAME **ZADEN, RICHARD J**
STREET ADDRESS **1749 NW 26TH ST., SUITE F**
CITY-ST-ZIP **FT. LAUDERDALE FL 33305**

TITLE **D** ☐ Change ☒ Addition
NAME **Clemons, Larry**
STREET ADDRESS **1807 N- Atlantic BLVD**
CITY-ST-ZIP **Ft. Lauderdale, FL 33305**

TITLE **D** ☐ Delete
NAME **SEILER, JOHN P**
STREET ADDRESS **2900 E. OAKLAND PARK BLVD., SUITE 200**
CITY-ST-ZIP **FT. LAUDERDALE FL 33306**

TITLE **D** ☐ Change ☒ Addition
NAME **Ahearn, Michael**
STREET ADDRESS **1749 N.E. 26th Street, Suite F**
CITY-ST-ZIP **Ft. Lauderdale, FL 33305**

TITLE **D** ☐ Delete
NAME **Paul Lopez**
STREET ADDRESS **Paul Lopez**
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Boutros, Ash**
STREET ADDRESS **2100 E. Sample Road, Suite 202**
CITY-ST-ZIP **Lighthouse Point, FL 33064**

TITLE **D** ☐ Delete
NAME **Michael**
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Hooper, Alan**
STREET ADDRESS **202 S.W. 2nd Street, Suite C**
CITY-ST-ZIP **Ft. Lauderdale, FL 33301**

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:

SIGNATURE REQUIRED

2/7/03

954 588 6115

CR2E037 (10/02)