

2002 UNIFORM BUSINESS REPORT (UBR)

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

05-17-2002 90018 026 ****74.00

DOCUMENT # N01000005579

1. Entity Name

MY FAMILY UNLIMITED, INC.

Principal Place of Business

**2509 NE 21 ST
 FT LAUDERDALE FL 33305**

Mailing Address

**2509 NE 21 ST
 FT LAUDERDALE FL 33305**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MACFARLAND RORKE, GERTRUDE ANNE
 2509 NE 21 ST
 FT LAUDERDALE FL 33305**

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

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

(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 Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	RORKE, THOMAS J	
STREET ADDRESS	2509 NE 21 ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33305	
TITLE	D	☐ Delete
NAME	MACFARLAND RORKE, GERTRUDE ANNE	
STREET ADDRESS	2509 NE 21 ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33305	
TITLE	D	☐ Delete
NAME	SCHMIDT, GREG	
STREET ADDRESS	2070 BETHEL BLVD	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	D	☐ Delete
NAME	TAGLIAMONTE, SANDRA	
STREET ADDRESS	2572 E SUNRISE BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33304	
TITLE	D	☒ Delete
NAME	STALKER, GEORGE L III	
STREET ADDRESS	1067 SW 33 ST	
CITY-ST-ZIP	PALM CITY FL 34490	
TITLE	D	☐ Delete
NAME	ASNERS, NANCY GOREN ESQ	
STREET ADDRESS	400 SW BOCA RATON BLVD	
CITY-ST-ZIP	BOCA RATON FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	GERTRUDE ANNE STALKER	☐ Change ☒ Addition
NAME	16339 MALABU DRIVE	
STREET ADDRESS	Weston, FL 33326-3401	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (9/01)

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 employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1133