

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


FILED
May 29, 2003 8:00 am
Secretary of State

4/2

04-24-2003 90245 043 ***61.25

DOCUMENT # N01000005900

1. Entity Name
LILLIAN MAE JANOSIK FOUNDATION, INC.



Principal Place of Business
**703 SW 74 AVE
N LAUDERDALE FL 33068**

Mailing Address
**703 SW 74 AVE
N LAUDERDALE FL 33068**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **APPLIED FOR**
82-0549228

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**JANOSIK, JOSEPH A SR.
703 SW 74 AVE
N LAUDERDALE FL 33068**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (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

TITLE	D	<input type="checkbox"/> Delete
NAME	JANOSIK, JOSEPH A SR.	
STREET ADDRESS	703 SW 74 AVE	
CITY-ST-ZIP	N LAUDERDALE FL 33068	
TITLE	D	<input type="checkbox"/> Delete
NAME	JANOSIK, DAWN T	
STREET ADDRESS	703 SW 74 AVE	
CITY-ST-ZIP	N LAUDERDALE FL 33068	
TITLE	D	<input type="checkbox"/> Delete
NAME	JANOSIK, JOSEPH A JR.	
STREET ADDRESS	703 SW 74 AVE	
CITY-ST-ZIP	N LAUDERDALE FL 33068	
TITLE	D	<input type="checkbox"/> Delete
NAME	JANOSIK, MELISSA	
STREET ADDRESS	703 SW 74 AVE	
CITY-ST-ZIP	N LAUDERDALE FL 33068	
TITLE	D	<input type="checkbox"/> Delete
NAME	JANOSIK, JAMES A	
STREET ADDRESS	703 SW 74 AVE	
CITY-ST-ZIP	N LAUDERDALE FL 33068	
TITLE	D	<input type="checkbox"/> Delete
NAME	JANOSIK, KIMBERLEY	
STREET ADDRESS	703 SW 74 AVE	
CITY-ST-ZIP	N LAUDERDALE FL 33068	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 Joseph A. Janosik Sr. **4-17-03 954-720-0015**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/02)