

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

**FILED**  
**Aug 29, 2003 8:00 am**  
**Secretary of State**

08-29-2003 90087 018 \*\*\*\*61.25

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**DOCUMENT # N02000008264**

1. Entity Name

**ARLINGTON FERGUSON III FOUNDATION INC.**



Principal Place of Business

**3110 NW 211TH STREET  
MIAMI FL 33056**

Mailing Address

**3110 NW 211TH STREET  
MIAMI FL 33056**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

**51-0434378**

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

**FERGUSON, ARLINGTON JR.  
3110 NW 211TH STREET  
MIAMI FL 33056**

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

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  
After September 10, 2003, min will be \$236.25**

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 **PD** ☐ Delete  
NAME **FERGUSON, BARBARA**  
STREET ADDRESS **3110 NW 211TH STREET**  
CITY-ST-ZIP **MIAMI FL 33056**

TITLE ☐ Change ☐ Addition  
NAME **Ferguson Barbara**  
STREET ADDRESS **1901 Rutland Street**  
CITY-ST-ZIP **OPA-LOCK 2, FL 33054**

TITLE **VD** ☐ Delete  
NAME **FERGUSON, ARLINGTON JR.**  
STREET ADDRESS **1901 NW RUTLAND STREET**  
CITY-ST-ZIP **MIAMI FL 33056**

TITLE ☐ Change ☐ Addition  
NAME **Ferguson Jr Arlington**  
STREET ADDRESS **3110 N.W. 211th Street**  
CITY-ST-ZIP **Miami, FL 33056**

TITLE **D** ☐ Delete  
NAME **FRANCOIS, DELIA**  
STREET ADDRESS **450 NE 178 STREET**  
CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162**

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

TITLE **D** ☒ Delete  
NAME **HENRY, DERON JR.**  
STREET ADDRESS **2734 NW 204TH TERRACE**  
CITY-ST-ZIP **CAROL CITY FL 33056**

TITLE ☒ Change ☐ Addition  
NAME **Director Henry, Sr. Deron**  
STREET ADDRESS **2734 N.W. 204th Ter.**  
CITY-ST-ZIP **Carol City FL 33056**

TITLE **SD** ☐ Delete  
NAME **FERGUSON, VICTORIA**  
STREET ADDRESS **3612 NW 194TH TERRACE**  
CITY-ST-ZIP **MIAMI FL 33056**

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

TITLE **D** ☐ Delete  
NAME **JONES, WILLIE J**  
STREET ADDRESS **2261 NW 58TH STREET**  
CITY-ST-ZIP **MIAMI FL 33142**

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:

*Barbara Ferguson*

**8/25/03**

**(305)624-5802**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)