

9/17/01-90120-001-\$122.50-\$61.25

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N07240**

1. Entity Name

DADE COUNTY FAWL SCHOLARSHIP LOAN FUND INC.

Principal Place of Business

ONE BISCAYNE TOWER
STE 1570
MIAMI FL 33131
US

Mailing Address

P O BOX 110708
MIAMI FL 33111-0708
US

2. Principal Place of Business

One Biscayne Tower

Suite, Apt. #, etc.

Suite 1570

City & State

Miami FL

Zip

33131

Country

US

3. Mailing Address

P.O. Box 110708

Suite, Apt. #, etc.

Miami FL

City & State

Miami FL

Zip

33111 0708

Country

*US*FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2480664

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARACINI, MICHELE

ONE BISCAYNE TOWER STE 3750
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name *Rosana Hernandez*
Street Address (P.O. Box Number is Not Acceptable)
One Biscayne Tower 201 South Biscayne Blvd
City *Miami, FL* FL Zip Code *33131*

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

Rosana E. Hernandez *ROSANA E. HERNANDEZ* 9/11/01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating) DATEFILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Delete
	<i>MARACINI, MICHELE</i>	<i>ONE BISCAYNE TOWER STE 3750</i>	<i>MIAMI FL 33131</i>	
	<i>PE</i>	<i>HOGAN SCOLA, JACQUELINE</i>	<i>99 NE 4TH ST STE 600</i>	☐ Delete
	<i>MIAMI FL 33132</i>			
	<i>S</i>	<i>ZABEL, SHELLEY</i>	<i>100 S BISCAYNE BLVD STE 3100</i>	☐ Delete
	<i>MIAMI FL 33131</i>			
	<i>T</i>	<i>DI GIULIAN, TERI</i>	<i>20809 BISCAYNE BLVD STE 200</i>	☒ Delete
	<i>MIAMI FL 33130</i>			
	<i>D</i>	<i>BERLOW-LEHNER, LISA</i>	<i>80 SW 8TH ST STE 2900</i>	☐ Delete
	<i>MIAMI FL 33130</i>			
	<i>D</i>	<i>FEINBERG, DYANNE</i>	<i>ONE BISCAYNE TOWER STE 1570</i>	☒ Delete
	<i>MIAMI FL 33131</i>			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change ☐ Addition
	<i>President</i>	<i>Hogan Scola, Jacqueline</i>	<i>99 NE 4th St Suite 600</i>	☐ Change ☒ Addition
	<i>MIAMI FL 33132</i>			
	<i>President Elect</i>	<i>Sarah Zabel</i>	<i>44 West Flagler Street, Suite</i>	☐ Change ☒ Addition
	<i>MIAMI FL 33130</i>			
	<i>Rosana Hernandez</i>	<i>Treasurer</i>	<i>2 South Biscayne Blvd, Ste 1570</i>	☐ Change ☒ Addition
	<i>MIAMI FL 33131</i>			
	<i>Deborah Magid</i>	<i>Secretary</i>	<i>100 S. Biscayne Blvd, Suite 3100</i>	☐ Change ☒ Addition
	<i>MIAMI FL 33131</i>			
	<i>Amy Furness</i>	<i>Newspaper Editor</i>	<i>100 S.E. 2nd Street, Suite 1000</i>	☐ Change ☒ Addition
	<i>MIAMI FL 33131</i>			

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/01 305-358-3580
Daytime Phone #