

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001062

FILED  
Feb 16, 2012  
Secretary of State

**Entity Name:** CHARITY UNLIMITED FOUNDATION, INC.

**Current Principal Place of Business:**

336 NW 5TH STREET  
MIAMI, FL 33128

**New Principal Place of Business:**

**Current Mailing Address:**

336 NW 5TH STREET  
MIAMI, FL 33128

**New Mailing Address:**

**FEI Number:** 26-2449875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FITZGERALD, J. PATRICK ESQ  
J PATRICK FITZGERALD & ASSOCIATES PA  
110 MERRICK WAY SUITE 3-B  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

FITZGERALD, J. PATRICK ESQ  
J PATRICK FITZGERALD & ASSOCIATES PA  
110 MERRICK WAY SUITE 3-B  
CORAL GABLES, FL 33134 US

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: J. PATRICK FITZGERALD

02/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: MIESZALA, MICHAEL  
Address: 680 NE 52ND STREET  
City-St-Zip: MIAMI, FL 33137

Title: TD  
Name: OSMANSKI, WILLIAM  
Address: 680 NE 52ND STREET  
City-St-Zip: MIAMI, FL 33137

Title: PD  
Name: MACPHEE, RICHARD  
Address: 26 GRANT AVENUE SOUTH  
City-St-Zip: HAMILTON, ONTARIO, CA L8N 2X5

Title: D  
Name: BROWN, MICHAEL  
Address: 4129 NORTH STATE ROUTE 1-17 POB 736  
City-St-Zip: MOMENCE, IL 60954

Title: D  
Name: AHR, PAUL R  
Address: 336 NW 5 STREET  
City-St-Zip: MIAMI, FL 33128

Title: D  
Name: MOORE, RICHARD  
Address: 680 NE 52 STREET  
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL MIESZALA

SD

02/16/2012

Electronic Signature of Signing Officer or Director

Date