

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N18231

FILED
Mar 28, 2002 8:00 AM
Secretary of State

Entity Name: THE ALEXANDER FOUNDATION, INC.

Current Principal Place of Business:

C/O LESLIE ALEXANDER
1200 N. FEDERAL HWY., STE. 307
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

C/O LESLIE ALEXANDER
1200 N. FEDERAL HWY., STE. 307
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 59-2751996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, LESLIE
1200 N. FEDERAL HWY., STE. 307
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALEXANDER, LESLIE,
Address: 1200 N. FEDERAL HWY S307
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: ALEXANDER, NANCI,
Address: 7809 AFTON VILLA COURT
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: ALEXANDER, JODI TARA,
Address: 7809 AFTON VILLA COURT
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LESLIE ALEXANDER

PD

03/28/2002

Electronic Signature of Signing Officer or Director

_____ Date