FILED
Jul 04, 2002 8:00 am
Secretary of State

05-23-2002 90088 008 ****61.25

- 37841

DO NOT WRITE IN THIS SPACE

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N20830

1. Entity Name

HEALTH FOUNDATION RESEARCH & EDUCATION OF SOUTH FLORIDA, INC.

Principal Place of Business	Mailing Address
601 BRICKELL KEY DRIVE STE. #901 MIAMI FL 33131 US	601 BRICKELL KEY DRIVE STE. #901 MIAMI FL 33131 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0005383 — 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
ADAMS, RICHARD B JR. ADAMS & ADAMS 66 W. FLAGLER STREET, 5TH FLOOR MIAMI FL 33130	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.

SIGNATURE: Richard B Adams Jr. 4/29/02

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

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUELLER, BEVERLY L 601 BRICKELL KEY DR., #901 MIAMI FL 33131 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Grossman, M.D., Philip 601 Brickell Key Drive, #901 Miami, FL. 33131 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GROSSMAN, PHILIP MD 601 BRICKELL KEY DR., 901 MIAMI FL 33131 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Adams, Richard B. 601 Brickell Key Drive, #901 Miami, FL 33131 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAGEN, SHELDON 601 BRICKELL KEY DR., #901 MIAMI FL 33131 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Nordqvist, M.D., Staffan 601 Brickell Key Drive, #901 Miami, FL 33131 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STANTON, WALTER J III 601 BRICKELL KEY DR., #901 MIAMI FL 33131 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KELLEY, SUSAN 601 BRICKELL KEY DRIVE # 901 MIAMI FL 33131 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ECKHART, JAMES M 601 BRICKELL KEY DRIVE # 901 MIAMI FL 33131 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: Richard B Adams 4/29/02 305 371-3333

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

CR2E037 (9/01)