

FILED
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90010 042 ****61.25

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N25080 ✓
1. Entity Name
MIAMI-DADE COUNTY SCHOOL BOARD FOUNDATION, INC.

DO NOT WRITE IN THIS SPACE

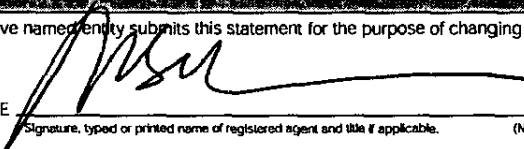
2. Principal Place of Business 1450 N.E. 2ND AVENUE Suite, Apt. #, etc. SUITE 912 City & State MIAMI, FL Zip 33132-8308 Country USA		3. Mailing Address 1450 N.E. 2ND AVENUE Suite, Apt. #, etc. SUITE 912 City & State MIAMI, FL Zip 33132-8308 Country USA	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0093213		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent		
	Name MERRETT STIERHEIM		
	Street Address (P.O. Box Number is Not Acceptable) 1450 N.E. 2ND AVENUE		
	City MIAMI	FL	Zip Code 33132

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.

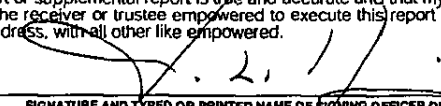
SIGNATURE  (Merrett Stierheim) -P/S 1/17/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEES \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS			
TITLE	D	TITLE	
NAME	BOLANOS, FRANK J	NAME	
STREET ADDRESS	3024 NW 99 PLACE	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33172	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	COBO, FRANK J	NAME	
STREET ADDRESS	7441 SW 125 AVENUE	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33183	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	HANTMAN, PERLA TABARES	NAME	
STREET ADDRESS	16181 W. TROON CIRCLE	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, LAKES, FL 33014	CITY-ST-ZIP	
TITLE	VP/T	TITLE	
NAME	HINDS, RICHARD H	NAME	
STREET ADDRESS	13723 SW 109 PLACE	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33176	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	INGRAM, ROBERT B	NAME	
STREET ADDRESS	1155 SHARAR AVENUE	STREET ADDRESS	
CITY-ST-ZIP	OPA-LOCKA, FL 33054	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	KAPLAN, BETSY	NAME	
STREET ADDRESS	6790 SW 122 DRIVE	STREET ADDRESS	
CITY-ST-ZIP	PINECREST, FL 33156	CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  (Dr. Richard Hinds) 1/17/02 (301) 995-1225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/01)

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Attachment

818859

(ATTACHMENT)

D&C# N25080

10. (continued)

D
KROP, MICHAEL M
9601 COLLINS AVENUE
BAL HARBOUR, FL 33154

D
MORSE, MANTY SABATES
1246SSW 15 TERRACE
MIAMI, FL 33145

D
PEREZ, MARTA R
1208 AGUILA AVENUE
CORAL GABLES, FL 33134

P/S
STIERHEIM, MERRETT R
6720 SW 124 STREET
MIAMI, FL 33156

D
STINSON, SOLOMON C
6900 NW 5 AVENUE
MIAMI, FL 33150