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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N31208 (4)

1. Corporation Name

HOOF & HALTER FOUNDATION OF FLORIDA, INC.



Principal Place of Business

14151 S.W. 26 STREET
DAVIE FL 33325

Mailing Address

14151 S.W. 26 STREET
DAVIE FL 33325

3. Date Incorporated or Qualified
03/15/1989

3a. Date of Last Report
08/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARNER, JACK D.
6200 STIRLING ROAD
DAVIE FL 33314

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ED
NAME SCHUPOLSKY, JAMES W
STREET ADDRESS 14151 SW 26 ST.
CITY - ST - ZIP DAVIE FL

☐ DELETE

TITLE D
NAME BOWERS, CLAUDIA
STREET ADDRESS 1223 OLD CARROLLTON RD
CITY - ST - ZIP DOUGLASVILLE GA

☐ DELETE

TITLE D
NAME MORAN, TERRY
STREET ADDRESS 14151 SW 26TH ST.
CITY - ST - ZIP DAVIE FL

☐ DELETE

TITLE D
NAME DAIMLER, CAROL
STREET ADDRESS 3700 W 6TH LANE
CITY - ST - ZIP HIALEAH FL

☐ DELETE

TITLE D
NAME MORAN, YVONNE G. DR
STREET ADDRESS 14151 SW 26 ST
CITY - ST - ZIP DAVIE FL

☐ DELETE

TITLE D
NAME FIEDLER, EMMA
STREET ADDRESS 2801 PINE TREE DR
CITY - ST - ZIP MIAMI BEACH FL

☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)