FILED

305-579-0500

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 17, 2001 8:00 am 8 Secretary of State DOCUMENT # **N33342** 1. Entity Name SOUTH FLORIDA ALA CHARITY FUND INCORPORATED 04-17-2001 90124 008 ****61.25 Principal Place of Business Mailing Address C/O HOLLAND & KNIGHT LLP C/O HOLLAND & KNIGHT LLP 701 BRICKELL AVE #3000 701 BRICKELL AVE #3000 MIAMI FL 33131 MIAMI FL 33131 US Principal Place of Business 3. Mailing Address SHOOK HARDY & BACON o Shook HARDY & BACON Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE BISCAME BLUD #2400 201 S. BISCAYNE BLUD 201 City & State City & State 4. FEI Number Applied For 65-0145698 MIAM ΜιαΜι Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33131 USA usa Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name - SMITH - BILT - VICKI Street Address (P.O. Box Number is Not Acceptable) HOFFMAN, CLAUDIA 701 BRICKELL AVENUE BIS CAYNE #3000 MIAMI FL 33131 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Addition TITLE TITLE ☐ Change Doelete ABRAHAMS, SHARON M 201 S BISCANNE BLUD #2200 MORAN, MARILYN NAME NAME STREET ADDRESS STREET ADDRESS 80 SW 8TH ST #2550 CITY-ST-7(P CITY-ST-7IE **MIAMI FL 33130** AL 33131-4336 TITLE ☐ Delete TITLE ☐ Change Addition HOFFMAN, CLAUDIA NAME NAME STREET ADDRESS 701 BRICKELL AVE #3000 STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP MIAMI FL 33131 TITLE ☐ Delete TITLE _Change__ _ Addition NĀME LOPEZ GRACE NAME STREET ADDRESS STREET ADDRESS 701 BRICKELL AVE #2100 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 Delete TITLE TITLE TD Change ☐ Addition NAME NAME HIRSCH, DAVID STREET ADDRESS STREET ADDRESS 1221 BRICKELL AVE #2200 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 a.2 TITLE Delete Change ☐ Addition NAME AFFINITO, PHYLLIS NAME STREET ADDRESS STREET ADDRESS 201 S BISCAYNE BLVD #2200 CITY-ST-2IP CITY-ST-ZIP <u>Miami FL 33131-4336</u> 6 D TITLE ☐ Delete TITI F Change ☐ Addition NAME SMITH-BILT, VICKI NAME STREET ADDRESS STREET ADDRESS 201 \$ BISCAYNE BLVD #2400 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131

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 legal, 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 empo