

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N39698

1. Entity Name

THE MISS HOMESTEAD SCHOLARSHIP FOUNDATION, INCOR

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90077 007 ****61.25

Principal Place of Business

378 SW 6 STREET
FLORIDA CITY FL 33034
US

Mailing Address

378 SW 6 STREET
FLORIDA CITY FL 33034-4850
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

65-0281355

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCOTT, MARIA
378 SW 6 STREET
FLORIDA CITY FL 33034

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 *Yesi Valencia*
Signature, typed or printed name of registered agent and title if applicable.

Yesi Valencia
(NOTE: Registered Agent signature required when reinstating)

4/20/00
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 ☐ Delete
NAME P
STREET ADDRESS SCOTT, MARIA
CITY-ST-ZIP 378 SW 6 STREET
FLORIDA CITY FL 33034

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME T
STREET ADDRESS YESENIA, VALENCIA
CITY-ST-ZIP 1290 NW 15 STREET
HOMESTEAD FL 33030

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2604 SE 21 CT #202A
CITY-ST-ZIP Homestead, FL 33035

TITLE ☐ Delete
NAME V
STREET ADDRESS FERGUSON, KATHY
CITY-ST-ZIP 23705 S.W. 153 CT.
HOMESTEAD FL 33030

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME S
STREET ADDRESS MEZA, BEA
CITY-ST-ZIP 116 E MOWRY DR., #202
HOMESTEAD FL 33030

TITLE ☐ Change ☒ Addition
NAME Myrna Cotto (S)
STREET ADDRESS 16901 SW. 304 ST
CITY-ST-ZIP Homestead, FL 33032

TITLE ☒ Delete
NAME D
STREET ADDRESS BATEMAN, DONNA
CITY-ST-ZIP 615 SE 29TH DRIVE, EAST LAKE
HOMESTEAD FL

TITLE ☐ Change ☒ Addition
NAME Lisa Deleon (D)
STREET ADDRESS 556 SW 7 ST.
CITY-ST-ZIP Florida City, FL 33034

TITLE ☐ Delete
NAME D
STREET ADDRESS BRANDENBERG, ANN MARIE
CITY-ST-ZIP 1344 N KROME AVE
HOMESTEAD FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 19/99