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Apr 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N45117 (1)

1. Corporation Name

J.F.M. FOUNDATION, INC.

Principal Place of Business

Mailing Address

3855 COCOGROVE AVE
MIAMI FL 33133-6119

3855 COCOGROVE AVE
MIAMI FL 33133-6119



3. Date Incorporated or Qualified
09/12/1991

3a. Date of Last Report
04/30/1996

2. Principal Place of Business
21 3855 Coco Grove Ave
Suite, Apt. #, etc.

2a. Mailing Address
26 Coco Grove Ave
Suite, Apt. #, etc.

4. FEI Number
65-0286142
Applied For
Not Applicable

22 City & State
27 City & State

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 Zip
28 Zip
Country

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24
25
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 No floor - all one level!
84 City FL 85 Zip Code

JOHN F. MCMATH
3855 COCO GROVE AVE.
5TH FLOOR
MIAMI FL 33133

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME MCMATH, JOHN F.
STREET ADDRESS 3855 COCOGROVE AVE
CITY-ST-ZIP MIAMI, FL 33133

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D
NAME SKINNER, JEAN M.
STREET ADDRESS 3000 JEFFERSON ST
CITY-ST-ZIP MIAMI, FL 33133

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D
NAME MCMATH, ROBERT L.
STREET ADDRESS 2777 SW 24 AVE
CITY-ST-ZIP MIAMI, FL 33133

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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.

CR2E037 (9/96)