NON-

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

08-28-2002 90036 028 ***550.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
N45854

02 SEP 23 PM 11:01

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DOCUMENT # N45854

1. Entity Name

ST. FRANCIS VILLAGE, INC. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2951 Sunrise Lakes Drive E.	2951 Sunrise Lakes Drive E.
Suite, Apt. #, etc.: Suite #104	Suite, Apt. #, etc.: Suite #104
City & State: Sunrise, FL	City & State: Sunrise, FL
Zip: 33322 Country: XXXXXX USA	Zip: 33322 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number — ☐ 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: EDWARD SOKOL

Street Address (P.O. Box Number is Not Acceptable): 2951 Sunrise Lakes Drive E., Suite 104

City: Sunrise FL Zip Code: 33322

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: Edward Wsokol — 8/23/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee Is $150.00
After May 1, Fee Is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President /D Sokol, FR. Edward 2951 Sunrise Lakes Drive., #104, Sunrise, FL 33322
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President /D XXXX Dagwell, John 2951 Sunrise Lakes Drive, #104 Sunrise, FL 33322
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary /D Incera, Carmen 1403 S.E. 2nd Avenue ~~Dania, FL 33004~~
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward Wsokol — 8/23/02 — 9549628889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034B (12/01)