FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:21

DOCUMENT # N46653 (4)

1. Corporation Name
MCINTYRE FOUNDATION, INC.

Principal Place of Business	Mailing Address
10235 W. SAMPLE RD. SUITE 103 CORAL SPRINGS FL 33065	10235 W. SAMPLE RD. SUITE 103 CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/31/1991
3a. Date of Last Report: 04/20/1994
4. FEI Number: 65-0308008 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

DALE, CHARLES S., JR.
701 W. CYPRESS CREEK RD.
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☒ Addition D
NAME	PARKS, MARLENE	1.2 NAME	
STREET ADDRESS	10235 W SAMPLE RD #103	1.3 STREET ADDRESS	Linda Cucci 5144 N. Springs Way
CITY-ST-ZIP	CORAL SPRINGS FL	1.4 CITY-ST-ZIP	Coral Springs, FL 33067
TITLE	D	2.1 TITLE	☐ Change ☒ Addition D
NAME	BROWN, LINDA	2.2 NAME	
STREET ADDRESS	10235 W SAMPLE RD #103	2.3 STREET ADDRESS	Bonnie Faleschini 9520 NW 42nd Court
CITY-ST-ZIP	CORAL SPRINGS FL	2.4 CITY-ST-ZIP	Coral Springs, FL 33065
TITLE	D	3.1 TITLE	☐ Change ☒ Addition D
NAME	HARRISON, GIGI	3.2 NAME	
STREET ADDRESS	10235 W SAMPLE RD.	3.3 STREET ADDRESS	Nancy Turpel 20889 Encanto Court
CITY-ST-ZIP	CORAL SPRINGS FL	3.4 CITY-ST-ZIP	Boca Raton, FL 33433
	No longer on Board		
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	CHARLES E. MCINTYRE	4.2 NAME	
STREET ADDRESS	10235 W SAMPLE RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	COX, KAREN	5.2 NAME	
STREET ADDRESS	10235 W SAMPLE RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	HAKEMIAN, CAROL	6.2 NAME	
STREET ADDRESS	10235 W SAMPLE RD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	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)(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.

SIGNATURE: Marlene Parks MARLENE PARKS 2/8/95 344-3496
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000B206