2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Aug 30, 2004 8:00 am Secretary of State DOCUMENT # N47040 1. Entity Name 08-30-2004 90014 028 ****61.25 FRIENDS OF 440 SCHOLARSHIP FUND, INC. Principal Place of Business Mailing Address **80 SOUTHWEST EIGHTH STREET** 80 SOUTHWEST EIGHTH STREET **SUITE 1910 SUITE 1910** MIAMI FL 33130 **MIAMI FL 33130** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (4/04) City & State City & State Applied For 4. FEI Number 63-0319696 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SADOW, RICHARD A. Street Address (P.O. Box Number is Not Acceptable) **80 SOUTHWEST EIGHTH STREET SUITE 1910 MIAMI FL 33130** Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Due By September 8, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. $b \mid D$ TITLE ☐ Delete TITLE ☐ Change **X** Addition SADOW, RICHARD A. ESQ. NAME 80 SW 8TH ST, #1910 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-7IP CITY-ST-ZIP. SD Treasurer / Director Change Delete ☐ Addition TITLE TITLE THOMAS W CONROY R. Cory Schnepper aloo South Dadeland Blud NAME NAME 80 SW 8TH ST #1910 ₩010 STREET ADDRESS STREET ADDRESS MIAMI FL 33130 CITY-ST-ZIP City-St-Zie EL 33126 VPD ☐ Defete TITLE ☐ Change Addition TITLE NAME JUDGE ALAN M KUKER NAME 80 SW 8TH ST #1910 STREET ADDRESS STREET ADDRESS MIAMI FL 33130 CITY-ST-ZIP CITY-ST-ZIP VPD Delete TITLE ☐ Change Addition CESAR A ARMSTRONG NAME NAME 80 SW 8TH ST #1910 STREET ADDRESS STREET ADDRESS MIAMI FL 33130 CITY-ST-ZIP CITY-ST-ZIP SD TITLE Delete TITLE Change Addition RICE-CHAROUHIS, JULIEAN NAME NAME 80 SW 8TH ST., #1910 STREET ADDRESS STREET ADDRESS **MIAMI FL 33130** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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

address, with all other like empowered

SIGNATURE AND THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with

FILED

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