

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90020 026 ****61.25

DOCUMENT # N49149

1. Entity Name

PLANNED GIVING COUNCIL OF DADE COUNTY, INC.

Principal Place of Business

C/O JOHN ANZIVINO
2699 S BAYSHORE DR. STE 500
MIAMI FL 33133
US

Mailing Address

C/O JOHN ANZIVINO
2699 S BAYSHORE DR. STE 500
MIAMI FL 33133
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

65-0406749

Applied For

Not Applicable

5. Certificate of Status Desired - ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAATTAMA, HENRY H JR
C/O AKERMAN SENTERFITT & EDISON, P.A.
ONE SE THIRD AVE, 28TH FLOOR
MIAMI FL 33131

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

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

(NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	D LUBITZ, LINDA S 9130 S DADELAND BLVD #1600 MIAMI FL 33156	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANZIVINO, JOHN 2699 S. BAYSHORE DRIVE, #500 COCONUT GROVE FL 33133	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Past President CHASEN, JERRY E 420 LINCOLN RD MIAMI BCH FL 33139	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	XX President CASALE, FRANK BARRY UNIVERSITY, 11300 NE 2 AVE MIAMI FL 33161	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer (v)(d) Zenov, Darin I. 200 S. Biscayne Blvd, Miami, FL 33131-2398	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary (v)(d) Schwartz, Jill 4200 Biscayne Blvd. Miami, FL 33137	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Committee Member Conroy, William (v) 9401 Biscayne Blvd Miami Shores, FL 33138	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Committee Member Tisthammer, Jennifer (v) 450 East Las Olas Blvd., Suite 180 Ft. Lauderdale, FL 33301	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President (v)(d) Lehrman, Richard A. 777 Arthur Godfrey Road, 4th Fl. Miami Beach, FL 33140	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President (v)(d) Kaplan, Gloria C. 521 N.E. 4th Avenue Ft. Lauderdale, FL 33301	☐ Change ☒ Addition

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/01

Date

Daytime Phone #

CR2E037 (10/00)