## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Gorporation Name

N9400002993 (3)

THE BANKATLANTIC FOUNDATION, INC.									
Principal Place of Business Mailing Address						T I DOUGH OF THE SPECIAL BODGE OF THE STATE	<b>9</b>     <b>40</b>     <b>40</b>     14 <b>6</b>	# 18110 (0100 )111 ( <b>6</b> 01	
1750 EAST SUNRISE BLVD. FT. LAUDERDALE FL 33304		1750 EAST SUNRISE BLVD. FT. LAUDERDALE FL 33304							
						<ol> <li>Date Incorporated or Qualified 06/16/1994</li> </ol>	3a. Date of t 05/0	ast Report 1/1995	
2. Principal P 21	lace of Business	2a. Mailing Address 26				4. FEI Number 65-0499150			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	е	City & State				Election Campaign Financing     Trust Fund Contribution		5.00 May Be	
Ζιρ <b>24</b>	Country 25	Zip <b>29</b>	30 Cou	intry		This corporation has liability for in Florida Statutes	tangible tax unde Yes ☐ No	er s. 199.032,	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered Agent		
				81	Name				
REITER, ROBIN 1750 EAST SUNRISE BLVD FORT LAUDERDALE FL 33304				82	Street Addr	ress (P.O. Box Number is Not Acceptable	)		
			į	83					
				B4	City		FL 85	Zip Code	
or registe	to the provisions of Sections 617,0502 red agent, or both, in the State of Florid ith, and accept the obligations of, Section	la. Such change was authoriz	zed by the c	orpo	amed corpor ration's boar	ation submits this statement for the purp ord of directors. I hereby accept the appoi	ose of changing ntment as registe	Its registered office ered agent. I am	
OIONIATUDE	Signature, typed or printed name of registered agent a			Agost	a goot so see de-	d when reinstaling)	DATE		
12.	OFFICERS AND	DIRECTORS	13.	) Adjoin	aiBreame redoner	ADDITIONS/CHANGES TO OFFIC		CTOBS IN 12	
TOLE	PT	DELETE	1,1 Tr	TL F		ADDITIONS/OFFICE TO OFFIC	Char		
NAME	LEVAN, ALAN B		1.2 N/					Ac Distriction	
STREET ADDRESS	1750 E. SUNRISE BLVD.				ADDRESS !				
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NAME	O'NEILL, JOHN P		22 N					igo [ Addition	
STREET ADDRESS	1750 E. SUNRISE BLVD.				ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33304			OTY-S					
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NAME	REITER, ROBIN	_	3.2 N/					. I was	
STREET ADDRESS	1750 E. SUNRISE BLVD.				ADDRESS				
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NAME			5.2 NA	AME			_	<del></del>	
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CITY - ST - ZIP				TY-ST					
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NAME			6 2 N/	AME			_	· <del>-</del>	
STREET ADDRESS					ODRESS				
CITY-SI-ZIP				TY-ST					
	y certify that the information supplied w	ith this filing is voluntarily furr				or the exemption stated in Section 119.0	7(3)(k), Florida St	atutes. 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 logal 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 or Bl ROBIN REITER 1-31-96 305-760-5458

SIGNATURE: