

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2002 8:00 am
Secretary of State

04-15-2002 90055 008 *****70.50

0017112

DOCUMENT # N94000004907

1. Entity Name

FAMILY TO FAMILY C.A.R.E.S NETWORK, INC.

Principal Place of Business

Mailing Address

**4823 S.W. 20TH STREET
 HOLLYWOOD FL 33023**

**4823 S.W. 20TH STREET
 HOLLYWOOD FL 33023**

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

65-0520629

☒ 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

**KENDRICK, EVELYN W
 4823 S.W. 20TH STREET
 HOLLYWOOD FL 33023**

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

TITLE **D** ☐ Delete
 NAME **KENDRICK, EVELYN**
 STREET ADDRESS **4823 S.W. 20TH STREET**
 CITY-ST-ZIP **HOLLYWOOD FL 33023**

TITLE **VP** ☒ Delete
 NAME **WALKER, CATHERINE**
 STREET ADDRESS **2523 NW 6TH ST BOX 143**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **ST** ☐ Delete
 NAME **KENDRICK, THELMA**
 STREET ADDRESS **2710 NW 25TH AVE.**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **P** ☐ Delete
 NAME **JACKSON, DIANE**
 STREET ADDRESS **1529 N.W. 6TH AVENUE**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **D** ☐ Delete
 NAME **FENCHER, ELOISE**
 STREET ADDRESS **1821 NW 33RD TERR.**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Secretary** ☐ Change ☒ Addition
 NAME **JERMILA CORNELIUS**
 STREET ADDRESS **411 N.W. 75th CT APT#1**
 CITY-ST-ZIP **HALLANDALE FL 33023**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TREASURER** ☒ Change ☐ Addition
 NAME **KENDRICK, THELMA**
 STREET ADDRESS **2710 N.W. 25th AVE.**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: *Evelyn W. Kendrick*

3-19-02 954-659-5171

CR2E037 (9/01)