


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000001230 (0)**

1. Corporation Name

SOUTH FLORIDA VETERANS' FOUNDATION, INC.



Principal Place of Business 800 N. MIAMI AVE. #1204E MIAMI FL 33136	Mailing Address 800 N. MIAMI AVE. #1204E MIAMI FL 33136-3543
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/15/1995		3a. Date of Last Report 12/09/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 65-0572875		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THOMSON, COL. JOHN M 370 MINORCA AVE. SUITE ONE CORAL GABLES FL 33134				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	TREBLAS, WILLIAM P JR.	800 N. MIAMI AVENUE, #1204E	MIAMI FL 33136				
	ROBERTS, ALVIN	P.O. BOX 380251, N/A	MIAMI FL 33238-0251				
	RAMIREZ, OSCAR DR.	7105 MIAMI LAKES DRIVE, #N23	MIAMI LAKES FL 33014				
	HAFFNER, SHELDON	4039 ENSENADA AVENUE	COCONUT GROVE FL 33133				

14. I do 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 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.

CR2E037 (9/96)