

FILE NOW: FILING FEE IS \$61.25

FILED
May 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																																																																																																													
DOCUMENT # N95000005497 (1) 1. Corporation Name THE SHERIDAN FOUNDATION, INC.																																																																																																															
Principal Place of Business		Mailing Address																																																																																																													
2. Principal Place of Business 21 3760 SHERIDAN AVE Suite, Apt. #, etc. City & State 23 MIAMI BEACH, FL Zip 24 33140		2a. Mailing Address 26 C/O ROSS & SROKA, PA Suite, Apt. #, etc. City & State 27 1900 SW 3 AVE City & State 28 MIAMI, FL Zip 29 33129																																																																																																													
3. Date Incorporated or Qualified 11/20/95		4. FEI Number 65-0627044																																																																																																													
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																													
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																																																													
8. Name and Address of Current Registered Agent STEINBERG, PAUL B 767 ARTHUR GODFREY BLVD MIAMI BEACH, FL 33140		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 86 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ Signature, typed or printed name of registered agent and title if applicable.																																																																																																															
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14. 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 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.																																																																																																															
SIGNATURE: <i>[Signature]</i> accountant <i>[Signature]</i> 4/29/98 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																															