

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**May 21, 2002 8:00 am**  
**Secretary of State**

05-21-2002 91158 031 \*\*\*\*61.25

**DOCUMENT # N96000003512**

1. Entity Name

**EXPANDING AND PRESERVING OUR CULTURAL HERITAGE, INC.**

Principal Place of Business

17 NW 4TH AVE.  
DELRAY BEACH FL 33444  
US

Mailing Address

P.O. BOX 3077  
DELRAY BEACH FL 33447  
US

2. Principal Place of Business

110 NW 5TH AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Delray Beach FL

City & State

4. FEI Number

35-0688730

Applied For

Not Applicable

Zip

33444

Country

U.S.

Zip

Country

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

FARRINGTON, VERA R  
310 NW 2ND AVE  
DELRAY BEACH FL 33444

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	PD	<input type="checkbox"/> Delete
NAME	FARRINGTON, VERA	
STREET ADDRESS	310 NW 2ND AVE	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	POMPEY, C.S.	
STREET ADDRESS	1122 MARTIN LUTHER KING DR NW	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE	VD	<input type="checkbox"/> Delete
NAME	VAUGHN, CLARENCE	
STREET ADDRESS	40 NW 4TH AVE	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE	TD	<input type="checkbox"/> Delete
NAME	DUBIN, BRAHM	
STREET ADDRESS	2200 HIGHLAND AVENUE	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MURRAY, ROSALIND	
STREET ADDRESS	2 N.W. 18 STREET	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE	D	<input type="checkbox"/> Delete
NAME	REINGOLD, MARK	
STREET ADDRESS	107 MACFARLANE DRIVE	
CITY-ST-ZIP	DELRAY BEACH FL 33483	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kenneth Howard	
STREET ADDRESS	5225 Raymond Dr. N	
CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Deborah Ricks	
STREET ADDRESS	7332 Willow Spring Cir.	
CITY-ST-ZIP	Boynton Beach, FL 33436	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Alfred Straghn	
STREET ADDRESS	26 NW 5 Ave	
CITY-ST-ZIP	Delray Beach, FL 33444	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mary Klong	
STREET ADDRESS	6261 Willoughby Dr.	
CITY-ST-ZIP	Lake Idorth, FL 33463	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rosalind Murray	
STREET ADDRESS	936 SW 38 CT	
CITY-ST-ZIP	Boynton Beach FL 33435	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mark Reingold	
STREET ADDRESS	107 MacFarlane Dr.	
CITY-ST-ZIP	Delray Beach FL 33483	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)