## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

N96000003741 (3) DOCUMENT #

1. Corporation Name

### WEBMAN FAMILY FOUNDATION, INC.

Principal Place of Business
720 CORAL WAY APT 13-E

Mailing Address

# **FILED** Jan 17 1997 8:00am Secretary of State



Daylime Phone # 0027047

Solite, Apt. #, etc.    20	720 CORAL WAY APT 13-E CORAL GABLES FL 33134		720 CORAL WAY APT 13-E CORAL GABLES FL 33134-4878					
Sulfe, Apt. 4, etc.    Sulfe, Apt. 4, etc.						3. Date Incorporated or Qualified 07/16/1996	3a. Date of Last I	Report
Suite, Apr. #, cit.    Suite, Apr. #, cit.	2 Principal Place of Business 2a. Mailing Address					4. FEI Number	A	pplied For
City & State 20	21	26			65-069440	N	ot Applicable	
City & State    City & State   City						5 Certificate of Status Desired	<u> </u>	Additional
20				·		5. Continuate of claims beared	Fee R	equired
9. Name and Address of Current Registered Agent  10. Name and Address of Were platered Agent  11. Name  12. Street Address (P.O. Box Number is Not Acceptable)  13. Name  14. City  15. Name  15. Name  16. Name  17. Street Address (P.O. Box Number is Not Acceptable)  18. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  10. Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Socitions 617,0502 and 617 1508. Florida Statutes in the above-mand corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Forida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent and first Agricustes. Provided by the corporation's board of directors. I hereby accept the appointment as register agent and first Agricustes. Provided by the corporation's board of directors. I hereby accept the appointment as register agent and first Agricustes. Provided by the corporation's board of directors. I hereby accept the appointment as register agent and first Agricustes. Provided by the corporation's board of directors. I hereby accept the appointment as register agent and first Agricustes. Provided by the corporation's board of directors. I hereby accept the appointment as register agent and first Agricustes. Provided by the corporation's board of directors. I hereby accept the appointment as register agent age	23		├ <del></del>			,		
9. Name and Address of Current Registered Agent  M & W AGENTS INC 9100 S DADELAND BLVD STE 1707  MIAMI FL 33156-7819  82 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  65 Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  86 Street Address (P.O. Box Number is Not Acceptable)  87 Street Address (P.O. Box Number is Not Acceptable)  88 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  86 Street Address (P.O. Box Number is Not Acceptable)  87 Street Address (P.O. Box Number is Not Acceptable)  88 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  86 Stree	<del></del> ·	Country	Zip	Countr	y	· · · · · · · · · · · · · · · · · · ·	_ ~	s. 199.032,
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9100 S DADELAND BLVD STE 1707 MIAMI FL 33156-7819  84 City FL 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 register of 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 register agent 1 am familiar with, and accept the obligations of. Section 617 0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ITIE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  12. OFFICERS AND DIRECTORS 13. THE CONTROL OFFICERS AND DIRECTORS IN 12  TIME  14. ITIE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  16. Change Add  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME  19. DELETE 11. TIME 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TIME 10. Change Add  14. ITIE 10. Change Add  14. TIME Add Add  14. Time Add Add Add Add Add Add Add Add Add Ad					i ivanie			
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14. I do hereby certify that the information supplied with this filling 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								
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.	informatio	on indicated on this annual report or si officer or director of the corporation or	upplemental annual report is tru the receiver or trustee empowe	e and acc red to exe	curate and th	iat my signature shall have the same lega	al effect as if made u	nder oath; that