

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # N96000004069

1. Entity Name

GTH Fellowship Foundation, Inc.

02 APR 30 AM 11:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1221 Brickell Avenue, #2100		3. Mailing Address Same as principal	
Suite, Apt. #, etc. Attn: Dir of Finance		Suite, Apt. #, etc. place of business	
City & State Miami, FL 33131		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0686251	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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IN THIS SPACE

## 7. Name and Address of Current Registered Agent

Name Garrett, Richard	
Street Address (P.O. Box Number is Not Acceptable) 1221 Brickell Avenue, Ste 2100	
City Miami	FL Zip Code 33131

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Bass, Hilarie 1221 Brickell Avenue, #2100 Miami, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Skolnick, Holly R. 1221 Brickell Avenue, #2100 Miami, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Barsh, Kerri L 1221 Brickell Avenue, #2100 Miami, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Orand, Rebecca 1221 Brickell Avenue, #2100 Miami, FL 33131
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rebecca Orand, Asst. Secretary

Date

Daytime Phone #

QR2E034B (12/01)

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ACCOUNT FILING COVER SHEET  
WALK IN

ACCOUNT #: FCA000000014

CORPDIRECT AGENTS  
103 N. MERIDIAN STREET  
TALLAHASSEE, FL 32301  
850-222-1173

CONTACT: Pam

DATE: 4-30-02

REF #: 0150. 6376

CORP. NAME: GTH Fellowship Foundation,  
Inc

PLEASE FILE THE ATTACHED ANNUAL REPORT AND ISSUE A:

( ) CERTIFIED COPY ( ☒ ) PLAIN COPY ( ) GOOD STANDING

PLEASE DEBIT OUR ACCOUNT IN THE AMOUNT OF \$ 61.25

AUTHORIZATION: Office