

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90104 009 ****61.25

DOCUMENT # **N960000004011**

1. Entity Name **Florida Appleseed Center for Law and Justice, Inc.**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6550 Nading Ave

3. Mailing Address **c/o Elliott**

Suite, Apt. #, etc.

Suite 320

Suite, Apt. #, etc.

City & State

Coral Gables, FL

City & State

Coral Gables, FL

Zip

33146

Country

USA

Zip

33124

Country

USA

4. FEI Number

65-0719038

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Elliott Manning

Street Address (P.O. Box Number is Not Acceptable)

1311 Miller Drive, Room G 261

[Univ. of Miami School of Law]

City

Coral Gables

FL

Zip Code

33146

**DO NOT WRITE
IN THIS SPACE**

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

Elliott Manning Treas

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/30/02

DATE

FEE IS \$61.25

Initial or Amended UBR

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	See Attached List	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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2. 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Handwritten: # N96 00000 4611/660992

FLORIDA APPLESEED CENTER FOR LAW AND JUSTICE
BOARD OF DIRECTORS

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~~Attachment~~ #
N92000004611 / 660992

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~~Attachment~~

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