

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 27 1998 8:00am  
Secretary of State

|                                                          |                                                                                                                                                                                        |
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| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1998</b> | <br>FLORIDA DEPARTMENT OF STATE<br>Sandra B. Morham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
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DOCUMENT # **N970000000970**  
1. Corporation Name  
**The JACK BRADLEY Foundation, Inc.**

Principal Place of Business Mailing Address  
**125 E. Broward Blvd # 200**  
**Ft. Lauderdale, Florida 33301**

|                                                                                                                                                                                                                        |                                                                                                                                                                                                             |
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| 2. Principal Place of Business<br>21 <b>125 E. Broward Blvd</b><br>Suite, Apt. #, etc. <b># 200</b><br>22 <b>City &amp; State</b><br><b>Ft. Lauderdale, FL</b><br>23 <b>Zip</b> <b>33301</b> <b>Country</b> <b>USA</b> | 2a. Mailing Address<br>26 <b>125 E. Broward Blvd</b><br>Suite, Apt. #, etc. <b># 200</b><br>27 <b>City &amp; State</b><br><b>Ft. Lauderdale, FL</b><br>28 <b>Zip</b> <b>33301</b> <b>Country</b> <b>USA</b> |
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|                                                                                                                                                                 |                                       |                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------------|
| 3. Date Incorporated or Qualified                                                                                                                               | 4. FEI Number<br><b>165-0733658</b>   | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                       | <b>\$8.75 Additional Fee Required</b> |                                                        |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                              | <b>\$5.00 May Be Added to Fees</b>    |                                                        |
| 7. Is this nonprofit corporation a homeowners association?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                          |                                       |                                                        |
| 8. This corporation owes or has paid the current year Intangible<br>Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |                                       |                                                        |

|                                                                                                                                                   |                                                                                                                                                         |
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| 9. Name and Address of Current Registered Agent<br><b>John J. Bradley</b><br><b>125 E. Broward Blvd. # 200</b><br><b>Ft. Lauderdale, FL 33301</b> | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>84 City <b>FL</b> 85 Zip Code |
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11. Pursuant to the provisions of Sections 617.001 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 provisions of, Section 617.0503, Florida Statutes.

SIGNATURE  DATE **4-1-98**  
(NOTE: Registered Agent signature required when registering)

|                                                                  |                                             |                                                       |                                                                              |
|------------------------------------------------------------------|---------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------|
| 12. OFFICERS AND DIRECTORS                                       |                                             | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                              |
| TITLE <b>DIRECTOR</b> <input checked="" type="checkbox"/> DELETE | NAME <b>BRADLEY, JOHN (JACK) E</b>          | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 1.2 NAME                                              |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, JOHN J</b>                 | 1.3 STREET ADDRESS                                    |                                                                              |
| STREET ADDRESS <b>125 E. Broward Blvd. #200</b>                  | CITY-ST-ZIP <b>Ft. Lauderdale, FL 33301</b> | 1.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, MARCELIN E</b>             | 2.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines, FL 33026</b> | 2.2 NAME                                              |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 2.3 STREET ADDRESS                                    |                                                                              |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 2.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 3.2 NAME                                              |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 3.3 STREET ADDRESS                                    |                                                                              |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 3.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 4.1 TITLE                                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 4.2 NAME                                              |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 4.3 STREET ADDRESS                                    |                                                                              |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 4.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 5.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 5.2 NAME                                              |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 5.3 STREET ADDRESS                                    |                                                                              |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 5.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 6.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 6.2 NAME                                              |                                                                              |
| TITLE <b>DIRECTOR</b> <input type="checkbox"/> DELETE            | NAME <b>BRADLEY, TIMOTHY</b>                | 6.3 STREET ADDRESS                                    |                                                                              |
| STREET ADDRESS <b>1364 NW. 122ND TERRACE</b>                     | CITY-ST-ZIP <b>Pembroke Pines FL 33026</b>  | 6.4 CITY-ST-ZIP                                       |                                                                              |

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:  DATE **4-1-98** (954) 5236160  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/97)