FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION 'ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT #1. Corporation Name N97000001398 (3)

LARGAY FOUNDATION, INC.

Principal Place of Business Mailing Address 4627 PONCE DE LEON BOULEVARD 4627 PONCE DE LEON BOULEVARD 3. Date Incorporated or Qualified **CORAL GABLES FL 33148** CORAL GABLES FL 33146 03/13/1997 4. FEI Number Applied For 65-0734278 Not Applicable 2. Principal Place of Business 2s. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc \$5.00 May Be 6. Election Campaign Financing П 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? ✓ No Yes 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NOSTRO, LOUIS Street Address (P.O. Box Number Is Not Acceptable) 201 SOUTH BISCAYNE BOULEVARD 83 **1600 MIAMI CENTER** MIAMI FL 33131 City 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 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 obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS DELETE DIRECTOR PRESIDENT Change Addition TITLE 11 TITLE LARGAY, CHARLES E 1.2 NAME NAME 9401 N.W. 106TH STREET, SUITE 101 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33178** CITY-ST-ZIP 1.4 CITY-ST-ZIP VP/S DELETE DIRECTOR/VICEPREDIGENT/ Change 2.1 TITLE TOTALE LARGAY, CHARLES E JR. 2.2 NAME Scenethay NAME 9401 N.W. 106TH STREET, SUITE 101 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33178 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE DIRECTOR /TREASURER WITTMER, STEVEN C NAME 3.2 NAME 4627 PONCE DE LEON BOULEVARD STREET ADDRESS 3.3 STREET ADDRESS **CORAL GABLES FL 33146** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST- ZIP 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:

198 305 6667229

FILED

Apr 29 1998 8:00am

Secretary of State