

# UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000002407

1. Entity Name  
**CHILDREN'S BENEVOLENT ASSOCIATION OF SOUTH FLORIDA, INC.**



Principal Place of Business  
**417 EAST SHERIDAN ST.  
SUITE 171  
DANIA FL 33004**

Mailing Address  
**417 EAST SHERIDAN ST.  
SUITE 171  
DANIA FL 33004**

**FILED**

**Aug 18, 2003 8:00 am  
Secretary of State**

03-24-2003 90651 046 \*\*\*\*61.25

**55054380**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0766867**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRAY, MICHAEL  
2925 PIERCE ST  
STE 20  
HOLLYWOOD FL 33020**

Name **Mary Murray**  
Street Address (P.O. Box Number is Not Acceptable)

**855 N. Northlake Dr  
Hollywood, FL 33019 FL 33019**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Mary Murray, PRES.*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**8/12/03**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	BRAY, MICHAEL	2925 PIERCE ST- #20	HOLLYWOOD FL 33020	<input checked="" type="checkbox"/>
T	SHADWICK, ALEXANDER K	410 S.E. 14TH STREET	DANIA BEACH FL 33004	<input type="checkbox"/>
DS	HONTER, GWEN	105 N.W. 1ST STREET	DANIA BEACH FL 33004	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
President	Mary Murray	855 N. Northlake Dr	Hollywood, FL 33019-1111	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

*Alexander K Shadwick Treasurer 8/12/2003*

Attachment

55054380

#N97000002407

Childrens Benevolent Association of South Florida, Inc.  
417 East Sheridan Street., Suite # 171  
Dania Beach , Florida 33004

08/13/2003

To Whom It May Concern,

As per a conversation with our accountant Sylvia Koutsodontis please find corrected Document # N97000002407. Thank you for your help and if you have any questions please contact us at 954-931-3028.

Alexandra K. Shadwick