

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000003396

1. Entity Name

VERA CASH FOUNDATION, INC.

RECEIVE

FILED
Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90016 005 ****61.25

Principal Place of Business

Mailing Address

4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146

4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146-2130

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

31-1542883

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

STEVEN C WITTMER
4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146

Name

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

City

FL

Zip Code

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

Steven C Wittmer *Steven C Wittmer* 2/14/2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
CHPD
WITTMER, STEVEN C
4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
SURIOL, LYNN W
4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
6880 S. W. 44 Street, Unit 100
Miami, FL 33155

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
DAS
MARSHALL, KATHERINE
4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
WITTMER, JOAN
4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
WITTMER, STEVEN T
4627 PONCE DE LEON BLVD.
CORAL GABLES FL 33146

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
2014 Fouth Street
Sarasota, FL 34237

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

SIG. JAS Steven C Wittmer 2/14/2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

305 666 7229
Daytime Phone #