2001 UNIFORM BUSINESS REPORT (UBR)

Jul 17, 2001 8:00 am DOCUMENT # N9700005972 **Secretary of State** 1. Entity Name 07-17-2001 90093 025 ****61.25 THE JOSE (CHEO) RAMIREZ-WIRSHING FOUNDATION, INC Principal Place of Business Mailing Address 1456 OBERLIN TERRACE 1456 OBERLIN TERRACE LAKE MARY FL 32746 LAKE MARY FL 32746 2. Principal Place of Business Mailing Address 16 a 4 a 4 Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable ountry \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Nãme Street Address (P.O. Box Number is Not Acceptable) WIRSHING, JOCELYNN M 1456 OBERUN TERRACE LAKE MARY SL 32746 City Zip Code FL 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 **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE X Addition Rodriquez, Keatriz WIRSHING, JOCELYNN NAME NAME STREET ADDRESS 1456 OBERLIN TERR STREET ADDRESS CITY-ST-ZIP LK MARY FL 32746 CITY-ST-ZIP 32708 TITLE ☐ Delete TITLE Change Addition Robert WRIGHT NAME RAMUEZ, ALBERTO E NAME 9000 6 BAY Dr STREET ADDRESS 145+ OBERLIN TERR STREET ADDRESS CITY-ST-ZIP LK MARY FL 32746 CITY-ST-ZIP ORLANDO FI TITLE TITLE Delete ☐ Change Addition NAME HOERTER, ROBERT E NAME STREET ADDRESS 757 GREEN OAKS CT STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition (NAME DALDAH, CESAR NAME STREET ADDRESS **BOX 61 N/A** STREET ADDRESS CITY-ST-ZIP MAYAGUEZ PR 00680-0061 CITY-ST-ZIP TD TITLE Delete TITLE Change ☐ Addition NAME OLEKSIK, MARK NAME STREET ADDRESS 255 TECHNOLOGY PARK SUITE 125 STREET ADDRESS City-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 TITLE SD ☐ Delete TITLE ☐ Change ■ Addition WARNER, CHERYL NAME NAME 1022 MANIGAN AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OVIEDO FL 32765

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.

FILED