2002 UNIFÓRM BUSINESS REPORT (UBR) **FILED** May 21, 2002 8:00 am Secretary of State DOCUMENT # **N98000001055** 1. Entity Name THE ELY EDUCATION FOUNDATION, INC. 05-21-2002 90859 032 ****70.00 Principal Place, of Business Mailing Address 595 NW 15TH STREET P.O. BOX 11178 POMPANO BEACH FL 33060 POMPANO BEACH FL 33063 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FFI Number Applied For City & State City & State 66-5082344 Not Applicable ķ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FORDE, FREDREKIA M 225 NW 15TH COURT POMPANO BEACH FL 33060 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11:. 10. ☐ Change ★★Addition TITLE Treasurer VD. XXX Delete TITLE <u>ō</u> NAME NAME Clay, Mary LANG, JIMMY STREET ADDRESS STREET ADDRESS 3464 N.W. 24th Street 672 NW 20TH COURT CITY-ST-ZIP CITY-ST-7IP POMPANO BEACH FL 33060 Lauderhill Lakes, Fl 33313 XXX Addition Change TITLE ☐ Delete TITLE CDP NAME Financial Secretary NAME FORDE, FREDREKIA M STREET ADDRESS STREET ADDRESS Sheppard, Mozelle 225 NW 15TH CT. CITY-ST-ZIP CITY-ST-ZIP 2151 N-W = 10th Court ---<u>POMPANO BCH FL 33060</u> ★ddition Change ☐ Delete TITLE TITLE Pompano Beach, F1 33069 Asst. Treasurer NAME BROOKS, MELVIN NAME (CHANGE) STREET ADDRESS STREET ADDRESS 7240 NW 44TH COURT CITY - ST - ZIP CITY-ST-ZIP LAUDERHILL FL 33319 XXXXChange XXX Addition TITLE ☐ Delete Asst. Recording Secretary VDT NAME Williams, Shirley (ADDITION) LEE, BOBBY STREET ADDRESS STREET ADDRESS 5801 NW 62nd Avenue Bldg. 22, #112 CITY-ST-ZIP 1420 S.W. 6th Avenue CITY-ST-ZIP Tamarac, Fl 33319 ☐ Change ☐ Addition ☐ Delete TITLE TITLE Deerfield Bch, Fl 33441 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete Recording Secretary NAME NAME (ADDITION) DUNCAN, JOANN STREET ADDRESS STREET ADDRESS 2461 N.W. 11th Street CITY-ST-ZIP CITY-ST-ZIP 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