

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004270

1. Entity Name

MCPBA FOUNDATION, INC.

Principal Place of Business

C/O LYNN C. WASHINGTON  
701 BRICKELL AVE. SUITE 3000  
MIAMI FL 33131

Mailing Address

P.O. BOX 015563  
MIAMI FL 33101  
US

**FILED**  
**Feb 13, 2001 8:00 am**  
**Secretary of State**

02-13-2001 90073 016 \*\*\*\*61.25

042135



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

31-1615678

Applied For

Not Applicable

Zip

Country

Zip

Country

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

JACKSON, WILLIE R JR  
1000 NW 62ND STREET  
MIAMI FL 33150

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

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 DP  
NAME COWART, TORSANT  
STREET ADDRESS 18722 NW 42 CT  
CITY-ST-ZIP MIAMI FL 33055 ☒ Delete

TITLE P  
NAME Brenda Williams  
STREET ADDRESS 16820 NW 20 Ave  
CITY-ST-ZIP Miami, Fl. 33054 ☒ Change ☐ Addition

NAME EALEY, WILLIE  
STREET ADDRESS 2900 NW 184 ST  
CITY-ST-ZIP MIAMI FL 33056 ☐ Delete

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

TITLE DV  
NAME CHEATHAM, BOBBIE  
STREET ADDRESS 17201 NW 22 AVE  
CITY-ST-ZIP MIAMI FL 33169 ☐ Delete

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

TITLE DT  
NAME MCLISH, ORVILLE  
STREET ADDRESS 960 NE 21 LANE #4  
CITY-ST-ZIP MIAMI FL 33162 ☒ Delete

TITLE TD  
NAME Vernell Reynolds  
STREET ADDRESS 9941 NW 21 Ave  
CITY-ST-ZIP Miami, Fl. 33147 ☒ Change ☐ Addition

TITLE DS  
NAME NAJIY, ANITA  
STREET ADDRESS 421 NW 104 ST  
CITY-ST-ZIP MIAMI FL 33150 ☐ Delete

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

TITLE D  
NAME CARR, RAMON  
STREET ADDRESS 3561 SW 70 AVE  
CITY-ST-ZIP MIRAMAR FL 33023 ☒ Delete

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

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:

*Vernell Reynolds*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 Feb 2001

(305) 795-2346

Date

Daytime Phone #

CR2E037 (10/00)