

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 AUG -1 AM 10:13

SECURITY 7/2003
TALLAHASSEE, FLORIDA

DOCUMENT # N98000005148

1. Entity Name
SOUTHEAST FLORIDA PRESERVATION, INC.



Principal Place of Business
**20 NORTH SWINTON AVENUE
DELRAY BEACH, FL 33444**

Mailing Address
**PO BOX 122X 20 North Swinton Ave.
DELRAY BEACH, FL 33444**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country Zip Country



☐ CHECK HERE IF MAKING CHANGES

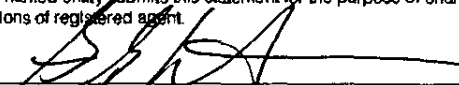
4. FEI Number **47-0425946** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**DEARBORN, BONNIE B
20 NORTH SWINTON AVENUE
DELRAY BEACH, FL 33444**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity admits 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  DATE **07/25/03**

(NOTE: Registered Agent signature required when reinstating)

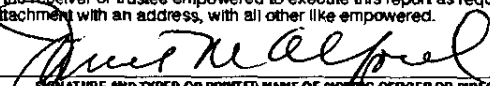
FILE NOW FEE IS \$61.25

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-2P	C ALFORD, JANET M 360 US HWY 1 VERO BEACH, FL 32962 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2P	D Handley, Jan 4300 North East 25th Avenue Fort Lauderdale, Florida 33308-4803 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2P	VC MURPHY, JANET G 218 ALMERIA ROAD WEST PALM BEACH, FL 33405 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2P	D Henderson, Shawn Michelle 1629 SW 28th Street Okeechobee, FL 34974 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2P	D ADAMS, ALTO L 26003 ORANGE AVE FORT PIERCE, FL 34995 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2P	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2P	D CARR, ROBERT 2932 MYRTLE OAK CIRCLE DAVIE, FL 33328 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2P	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2P	D DUNCAN, SUSAN 8206 SOUTH EAST PALM STREET HOBE SOUND, FL 33465 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2P	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2P	D HABER, MERLE 730 COQUINA CT. BOCA RATON, FL 33432 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2P	☐ 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:  DATE **7/17/03** 772-794-0601

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)

7/21/03