

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90224 049 ****70.00

DOCUMENT # N98000007292

1. Entity Name

WATSON'S FOUNDATION, INC.



Principal Place of Business

**16183 S.W. 108TH AVE.
MIAMI FL 33157**

Mailing Address

**16183 S.W. 108TH AVE.
MIAMI FL 33157**

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 **65-0881640**

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

**WATSON, JOSEPH
16183 S.W. 108TH AVE.
MIAMI FL 33157**

Name **Dorothy Watson**

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

16183 S.W. 108TH Ave

City

MIAMI

FLA

FL

Zip Code
33157

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/03

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 **PD** ☐ Delete
NAME **WATSON, DOROTHY**
STREET ADDRESS **16183 S.W. 108TH AVE.**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **D** ☒ Change ☐ Addition
NAME **WATSON JOSEPH**
STREET ADDRESS **16183 SW 108TH AVE**
CITY-ST-ZIP **MIAMI FLA 33157**

TITLE **SD** ☐ Delete
NAME **BETHUNE, YOLANDA**
STREET ADDRESS **2445 N.W. 62ND ST**
CITY-ST-ZIP **MIAMI FL 33147**

TITLE **VPD** ☐ Change ☒ Addition
NAME **JONES WILLIE**
STREET ADDRESS **2261 N.W. 58TH STREET**
CITY-ST-ZIP **MIAMI FLA 33142**

TITLE **TD** ☐ Delete
NAME **PEARSON, POLLY**
STREET ADDRESS **2373 N.W. 66TH ST.**
CITY-ST-ZIP **MIAMI FL 33147**

TITLE **D** ☐ Change ☒ Addition
NAME **Angel Watson Richardson**
STREET ADDRESS **338 NW 53rd St**
CITY-ST-ZIP **MIAMI FLA 33142**

TITLE **S** ☒ Delete
NAME **WILLIAMS, FRANCINE**
STREET ADDRESS **11602 NE 12TH AVENUE**
CITY-ST-ZIP **NORTH MIAMI FL 33161**

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

TITLE **MDF** ☒ Delete
NAME **FERGUSON, DERRICK**
STREET ADDRESS **22210 SE PL**
CITY-ST-ZIP **MIAMI FL 33190**

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

TITLE **M** ☒ Delete
NAME **JOSEPH, JACINTH**
STREET ADDRESS **10340 SW 198 STREET**
CITY-ST-ZIP **MIAMI FL 33157**

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:

[Signature]

1/7/03 7862874779

CR2E037 (10/02)