

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000000477

FILED
Jan 08, 2003
Secretary of State

Entity Name: SCHOOLFIRST FOUNDATION, INC.

Current Principal Place of Business:

2100 S. OCEAN LN., NO. 212
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

2100 S. OCEAN LN., NO. 212
FT. LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 65-0892805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYE, DAVID W ESQ.
FOWLER WHITE GILLEN BOGGS VILLAREAL, P.A.
101 N. MONROE ST., STE. 1090
TALLAHASSEE, FL 32302 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PED () Delete
Name: CURRAN, CHRISTOPHER L
Address: 2100 S OCEAN LANE NO. 212
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: SD () Delete
Name: HARVEY, ROBERT A
Address: 2100 S OCEAN LANE NO. 212
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D () Delete
Name: PACKARD, GEORGE
Address: 2810 SOUTHAVEN ROAD
City-St-Zip: ANNAPOLIS, MD 21401

Title: D () Delete
Name: WHITELAW, ROBERT
Address: 1617 JFK BLVD 19TH FLOOR
City-St-Zip: PHILADELPHIA, PA 19103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A. HARVEY

SD

01/08/2003

Electronic Signature of Signing Officer or Director

Date