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Secretary of State
04-28-2003 91438 015 ****61.25

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

DOCUMENT # N99000003429

1. Entity Name
SOUTH FLORIDA CHAPTER FLORIDA STATE GUARDIANSHIP ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8930 STATE ROAD 84 #316 DAVIE, FL 33324 US	8930 STATE ROAD 84 #316 DAVIE, FL 33324 US

☐ CHECK HERE IF MAKING CHANGES

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 65-1096154 ☐ 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
WOLONICK, LINDA M 9662 RIDGECREST COURT DAVIE, FL 33328	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's 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-ZIP	~~D~~ ☐ Delete ZAMORA, ENRIQUE 10 NW 42ND AVE., STE 600 MIAMI, FL 33126	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ ☐ Delete ABEL-REISER, BARBARA ~~666 BISCAYNE BLVD~~ ~~MIAMI, FL 33137~~	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Immediate Past President ☒ Change ☐ Addition Coral Gables 1401 Tunis Street, FL 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VPD~~ ☐ Delete SHUMAN-AUSPITZ, LORI 1641 HARBORSIDE DR. WESTON, FL 33326	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ☐ Delete TURNER, WENDY 11701 S.W. 57 COURT CORAL GABLES, FL 33156	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPP ☐ Change ☒ Addition Jacqueline Hertz 565 N. Shore Drive, Miami Beach, FL 33141
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ☐ Delete HERTZ, STEVEN 565 N. SHORE DRIVE MIAMI BEACH, FL 33141	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ Delete COOPER, BONNIE L 77 CRANIUM BLVD., # 8A KEY BISCAYNE, FL 33149	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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: Enrique Zamora Enrique Zamora 4-22-03 954-370-0041
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #