2/27

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State
02-27-2001 90357 044 ****61.25

DOCUMENT # N99000005394

1. Entity Name

FLORIDA FEDERATION OF COMMUNITY FOUNDATIONS, INC

Principal Place of Business	Mailing Address
686 HUNT CLUB BOULEVARD SUITE 180 LONGWOOD FL 32779	686 HUNT CLUB BOULEVARD SUITE 180 LONGWOOD FL 32779

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
800 E. BROWARD Blvd.	800 E. BROWARD Blvd.
Suite, Apt. #, etc.: SUITE 610	Suite, Apt. #, etc.: SUITE 610
City & State: Ft Lauderdale, FL	City & State: FT LAUDERDALE FL.
Zip: 33301-2084 Country: U.S.A.	Zip: 33301-2084 Country: U.S.A.

4. FEI Number: 59-3609874 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DODD, WILLIAM F
513 SABAL LAKE DR
APARTMENT 107
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name: JOE PENA
Street Address (P.O. Box Number is Not Acceptable): 200 S. BISCAYNE BLVD #505
JADE COMMUNITY FOUNDATION
City: MIAMI FL Zip Code: 33131

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: Joseph F Pena 1-26-01
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CBD STEARNS, STEWART 1800 SECOND ST STE 103 SARASOTA FL 34236	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chairman D LINDA CARTER 800 E BROWARD BLVD. SUITE 610 FT. LAUDERDALE, FL. 33301	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCED CARTER, LINDA 800 E BROWARD BLVD STE 610 FORT LAUDERDALE FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice Chair D SHANNON SADLER 324 DATURA STREET, SUITE 340 WEST PALM BEACH, FL 33401	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SANDQUIST, DIANE 1411 EDGEWATER DR STE 203 ORLANDO FL 32802	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer D GEORGE BAXTER 4950 W. KENNEDY BLVD SUITE 250 TAMPA, FLORIDA 33609	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary D JOE PENA 200 S. BISCAYNE BLVD. SUITE 505 MIAMI, FLORIDA 33131	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 Required Signature Required 2/26/01 954-761-9503
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #